ATHLETE SERVICE AWARD NOMINATION



DATE: _____

12 Years

In recognition of completing Twelve (12) continuous years of dedication and commitment to Little Athletics at Belmont Little Athletics Centre; Little Athletics Club nominates (Name of Nominating Club) (First name of Athlete) (Surname of Athlete) COMPLETED YEARS OF REGISTRATION: 1. Season Number of Events 1. _____ 2. _____ 2. Season 3. 3. _____ Season 4. 4. Season 5. 5. _____ Season 6. Season 6. _____ 7.____ 7. Season 8. ____ 8. Season 9. _____ 9. Season 10. _____ 10. Season Season 11. _____ 11. 12. _____ 12. Season SIGNATURES: (Club President) (Club Secretary) **BLAC USE ONLY** NOMINATION APPROVED BY EXECUTIVE RESOLUTION: (BLAC President) (BLAC Executive Officer)