



ATHLETE SERVICE AWARD NOMINATION

9 Years

In recognition of completing Nine (9) 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. Season	_____ / _____		2. _____
3. Season	_____ / _____		3. _____
4. Season	_____ / _____		4. _____
5. Season	_____ / _____		5. _____
6. Season	_____ / _____		6. _____
7. Season	_____ / _____		7. _____
8. Season	_____ / _____		8. _____
9. Season	_____ / _____		9. _____

SIGNATURES:

(Club President)

(Club Secretary)

BLAC USE ONLY

NOMINATION APPROVED BY EXECUTIVE RESOLUTION:

(BLAC President)

(BLAC Executive Officer)

DATE: _____