**Bogan Shire Council Australia Day Awards  
Community Event Nomination Form**

**DETAILS OF EVENT AND ORGANISER OR ORGANISATION BEING NOMINATED:**

|  |  |
| --- | --- |
| *Event Name:* |  |

**Organiser and / or Organisation details.**

|  |  |  |  |
| --- | --- | --- | --- |
| *Title:* | *Name:* | *Surname:* | |
| *Organisation Name:* | | | |
| *Address:* | | | |
|  | | | *Postcode:* |
| *Telephone:* | | | |
| *Email:* | | | |

Was the Community event held in Bogan Shire? YES/NO

**I, on behalf of the nominated event, agree to be nominated for this award.**

|  |  |
| --- | --- |
| *Signature:* | *Date:* |

**REASON FOR NOMINATING – HOW HAS THE ORGANISATION / EVENT CONTRIBUTED TO THE COMMUNITY?**

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**Please attach additional sheets/material if required.**

**OTHER PERSONS TO CONTACT FOR FURTHER INFORMATION ABOUT EVENT**

|  |  |
| --- | --- |
| *Name:* | *Name:* |
| *Telephone:* | *Telephone:* |
| *Email:* | *Email:* |
| *Address:* | *Address:* |

**TO BE COMPLETED BY PERSON SUBMITTING NOMINATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Title:* | *Name:* | *Surname:* | | |
| *Address:* | | | | |
|  | | | *Postcode:* | |
| *Telephone:* | | | | |
| *Email:* | | | | |
| *Organisation (if any):* | | | | |
| *Signature:* | | | | *Date:* |

**PLEASE USE THIS CHECKLIST TO ENSURE THAT YOUR NOMINATION IS COMPLETE**

* I have read the Nomination Guidelines and Criteria.
* The information provided in this nomination is accurate.
* Supporting material, including references and media (newspaper clippings) are attached.
* The event representative has signed the Nomination Form.

**Nominations close on Monday 3 December, 2018**

Please send completed form to:

The General Manager

PO Box 221

Nyngan NSW 2825

The awards will be announced on Australia Day Saturday 26 January 2019.