

Bogan Shire Council Australia Day Awards Community Event Nomination Form

DETAILS OF EVENT AND ORGANISER OR ORGANISATION BEING NOMINATED:

Event Name:					
Organiser and	d / or Organisation o	details.			
Title:	Name:				
Organisation N	lame:				
Address:					
				Postcode:	
Telephone:					
Email:					
Was the Comm	unity event held in Boga	an Shire?			YES/NO
I, on behalf of	f the nominated ever	nt, agree to be n	ominated fo	r this award.	
Signature:				Date:	
REASON FOR	R NOMINATING – HONITY?	OW HAS THE O	RGANISATIO	ON / EVENT CONT	RIBUTED TO

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 COMPL	ETED BY PERSON SUBM	IITTING NO	MINATIO	ON	
Title:	Name:		Surname:		
Address:			•		
				Postcode:	
Telephone:					
Email:					
Organisation (if ar	ny):				
Signature:				Date:	
				1	
PLEASE USE T	HIS CHECKLIST TO ENSU	JRE THAT Y	OUR N	OMINATION 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 29 November, 2021

Please send completed form to:

The General Manager PO Box 221 Nyngan NSW 2825

The awards will be announced on Australia Day Wednesday 26 January 2022.

