

NOMINATION FOR THE HISTORICAL APPRECIATION AWARD

Recognizing individuals and/or organizations that have played a significant role in the promotion or conservation of the history of Wasaga Beach.

NOMINATOR INFORMATION: __Mr. __Mrs. __Ms. __Dr. Salutation: _____Last Name:_____ First Name: Wasaga Beach Address: _____ Email: ____ Postal Code: Telephone Numbers: Day:_____ Evening:_____ Signature: I prefer to be contacted by telephone or email HISTORICAL APPRECIATION NOMINEE INFORMATION: Please provide a detailed description of the nominee and their achievements in at least one of the categories listed below. __Historical Awareness/Education __Research/Documentation Preservation/Conservation Please use additional pages as necessary:

A detailed description must be provided or the application cannot be considered.

Name of Nominee _____

Please submit your nomination by April 1 to:

Dina Lundy, Clerk/Director of Legislative Services Town of Wasaga Beach 30 Lewis Street Wasaga Beach, ON L9Z IA1 Tel: 705-429-3844 ex 2223

Fax: 705-429-6732

Email: clerk@wasagabeach.com