

THE HERITAGE AWARDS NOMINATION FORM

USE TO NOMINATE AN INDIVIDUAL, GROUP, OR ORGANIZATION

PLEASE REMEMBER

PERSONS SELECTED TO VOTE ON THE AWARDEES RELY ON THE INFORMATION THAT YOU PROVIDE ON THIS NOMINATION FORM. Please be detailed in your entry.

Name of Nominee or Organization: _____

Address of Nominee: _____

If an Organization, Nominated Organization Chief's or President's Name, Email, and Address:

Name: _____

Address: _____

Phone Number: _____

Email: _____

If an individual, please supply Name of Nominee's Organization: (i.e. Racine First Responders)

Awards Category (See description on reverse side): _____

Description of Achievement (Describe why this person or Organization should be recognized):

(You may attach pages, articles or other information that will aid in the selection)

Your Name: _____ Your Phone Numbers: _____

Return completed forms by November 30, 2023 to:

Dr. Elizabeth S. Markham
736 Lathrop Avenue
Racine, WI 53405

OR E-Mail to emark39325@yahoo.com