

Local Legend Award Nomination Form

Nominee's Name(s):					
-					
Address:					
Telephone: Email Address:					
Dance Preference:	square dancer		round	□ round dancer	
	square	dance caller	□ round	l dance cuer	
Number of years in the Please list the outstand of this sheet or a separa	ing local servi		inee has perfo	ormed. (You ma	y use the back
SDFNE Nominating M Address:	lember(s):				
Talanhana:					
Telephone: Email Address:					
Date of Nomination:					

Please note: Those who have received the Hall of Fame Award will not be eligible to receive the Local Legend Award. However, receiving the Local Legend Award will not disqualify the recipient from future consideration for the Hall of Fame Award.

Please mail nomination application forms to:

Bud & Judy Clifford P.O. Box 54 West Danville, VT 05873

(802) 563-2777 budjudysquaremoo@hotmail.com