



# Square Dance Foundation of New England, Inc.

## Local Legend Award Nomination Form

Nominee's Name(s): \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_

Dance Preference:

square dancer

round dancer

square dance caller

round dance cuer

Number of years in the activity: \_\_\_\_\_

Please list the outstanding local service(s) your nominee has performed. (You may use the back of this sheet or a separate piece of paper.):

SDFNE Nominating Member(s): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_

Date of Nomination: \_\_\_\_\_

\_\_\_\_\_

*Please note: Those who have received the Hall of Fame and/or the Yankee Clipper 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 or Yankee Clipper Awards.*

**Local Legend Award Chairman**

**Please mail forms to:**

**SDFNE Office**

**Attn: Hall of Fame Chairman**

**P O BOX 54**

**WEST DANVILLE, VT. 05873-0054**