

# DRY LAKES RACERS AUSTRALIA HALL OF FAME

# **NOMINATION FORM**

PLEASE NOTE: Nominations must be received no later than 31<sup>st</sup> October each year.

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	Person	VOII	are	nomina	ting	tor an	award
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Title:		Surname:	
First Name:		Preferred Name:	
Postal Address:			
State:		Postcode:	
Position/Title:			
Club/Committee/Function/Role			
Member Number:			
Phone (AH):		Phone (BH)	
Mobile:		Email:	
2. Person who is subm	nitting the nomination		
Title:		Surname:	
First Name:		Preferred Name:	
Postal Address:			
State:		Postcode:	
Position/Title:			
Club/Committee/Function/Role			
Member Number:			
Phone (AH):		Phone (BH)	
Mobile:		Email:	
3. Activities undertaken by the person you are nominating for an award In this section, space has been provided for you to set out details of how the nominee has achieved, contributed or benefitted the DLRA			



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### 4. Details of referees

Please provide details of referee/s that are able to make direct comment on the contribution/service of the person you are nominating.

### Referee 1

Surname:	First Name
Postal Address	
State:	Postcode:
Club/Committee/Function/Role	
Member Number:	
Phone (AH):	Phone (BH)
Mobile:	Email:

#### Referee 2

Surname:	First Name	
Postal Address		
State:	Postcode:	
Club/Committee/Function/Role		
Member Number:		
Phone (AH):	Phone (BH)	
Mobile:	Email:	

### Referee 3

Surname:	First Name	
Postal Address		
State:	Postcode:	
Club/Committee/Function/Role		
Member Number:		
Phone (AH):	Phone (BH)	
Mobile:	Email:	

## 5. Nominator's Signature

<b>a.</b>	
Signature:	l Date:
Jigilature.	l Date.

Nominations are to be sent to;

Dry Lakes Racers Australia Hall of Fame PO Box349 Castlemaine VIC 3450