MIDWEST CLOWN ASSOCIATION LIFETIME ACHIEVEMENT AWARD NOMINATION FORM

Name of Proposed Nominee:							
Phone Number:		E-Mail Addre	E-Mail Address:				
Address: _							
City:			_ State:	Z	ip:		
Category:	Living:	(or) Deceased:		·			
Why do you	feel this person	should receive this award?	(Feel free to attac	ch a separate de	ocument.) _		
							
Submitted b	y:						
Phone:		E-Mail Address: _					
Address: _							
City:			State:		Zip:		
Enclosures:	(You may enclo	ose supporting documentation	on. Please invento	ory attachments	s.)		
Articles							
Video:							
Pictures: _							
Other Docui	mentation:						
Feel free to	submit any addi	tional information that will he	elp your nominee.				

Completed forms must be received by March 1st of this year!!

Please e-mail Lifetime Achievement Award nominations forms to: angela.gonzalez@indy.gov

Or mail to: Angela Gonzalez

8419 Bermuda Drive

Indianapolis, IN 46219 317-840-1583

	ITIONAL PAGES: (Nomination for	to receive the
	vest Clown Association Lifetime Achievement Award.)	
	ily members may not nominate an individual for the Lifetime Achievement Award ving: (Attach additional pages if necessary.)	d. Please respond to the
1.	What offices did this person hold in the Midwest Clown Association?	
2.	On what Midwest Clown Association committees did this person serve? (Jr. Website, 3-Ring News, Competition, Hall of Fame, Lifetime Achievement, Co.	
3.	What articles has this person written for 3-Ring News?	
4.	What lectures has this person given at a Midwest Clown Association Round-	Up and at what Round-Up?
5.	Has this person ever judged at a Midwest ClownAssociation Round-Up? Wh	nat and When?
6.	How has this person influenced you in clowning?	