



**Sidney-Shelby County YMCA
Triangle of Honor Award
Nomination Form
Deadline: July 31**

Eligibility

- A. Nominees must be/have been dedicated to the mission and core values of the Sidney-Shelby County YMCA.
- B. Nominees should be of a caliber that they would be immediately recognized by their peers as someone who is/was well known and admired for his/her service to the Sidney-Shelby County YMCA.
- C. Nominees must be or have been involved with the Sidney-Shelby County YMCA for at least 10 years.
- D. Nominees may be or have been volunteers (program or policy), donors, staff members or members of the community at large who have had a significant impact on the Sidney-Shelby County YMCA.
- E. Nominees living or deceased will be considered regardless of race, gender or financial commitments to the organization.
- F. Nominees must possess a record of innovative, inspirational, highly successful leadership in support of the Sidney-Shelby County YMCA.

I nominate _____ for the selection committee's consideration to be honored as a Triangle of Honor Recipient.

Nominee's Contact Information:

Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ E-Mail _____

If Nominee is deceased, please enter the nearest relative's contact information.

Name: _____ Telephone Number: _____

Contact Information of person nominating:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Email: _____

Signature: _____ Date: _____

