

2020 Awards / Recognition Nomination Form

**Category Nominated:** *Please tick category / One form only to be used for each nomination*

**Qld Rep Bowler of the Year**

**Coach of the Year**

**Athlete with a Disability Bowler of the Year**

**Qld TBA Rep Team of the Year**

**Junior Bowler of the Year**

**Volunteer of the Year**

**Youth Bowler of the Year**

**Volunteer Recognition Award**

**Adult Bowler of the Year**

**Association of the Year**

**Senior Bowler of the Year**

**TBAQ Hall of FAME**

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| --- | --- |
| **Person/Team you are nominating:** |  |
| **Email Address contact:** |  |
| **Award/Recognition category:** |  |
| **Postal Address:** |  |
| **Name of Nominator:** |  |
| **TBA membership number:** |  |
| **Nominator’s Phone:** |  |
| **Nominator’s Email:** |  |

Will this Person / Team be attending the Awards Night  **YES NO**

|  |  |  |  |
| --- | --- | --- | --- |
| **Estimate of how many persons attending in total and names:** |  | | |
|  |  | | |
|  |  | **Signature:** |  |

By completing this nomination form, the nominator acknowledges the nomination process as outlined in the 2017 State Awards Policy Nomination Criteria and that the nominator is a financial member of TBA.

***I certify that the person/s nominated is / are proper and appropriate and I am not aware of any personal / behavioural / criminal issues with this person/s.***

**Details of Nominee Achievements (including reasons the Nominee has achieved a level of excellence greater than that of their peers which warrants them being the recipient of an award):**

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**200 WORD SUMMARY (12 point font Arial)**

**(To be used if Nomination is successful)**

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| --- |
|  |

***Please ensure all questions on this nomination form***

***have been answered.***

***Nominations are to be sent to:***

**Tenpin Bowling Association of Qld Inc.**

**Secretary: Benjamin Moore**

**SPORTS HOUSE**

**150 CAXTON STREET**

**MILTON QLD 4064**

**Email: tbaq@tbaq.org.au Phone: 07 38765400**

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