



## Inaugural Unison Awards: Nomination Form

Name of Nominee \_\_\_\_\_

**Nominee's Unison Affiliation**

(e.g., chorus member, donor, sponsor) \_\_\_\_\_

**Nominee's Signature** \_\_\_\_\_

*By signing the Nomination Form, the Nominee agrees to be put forward as a nominee.*

Name of Nominating Chorus \_\_\_\_\_

**Award Category** (select one)

Service

Innovation

Legacy

**Please provide the name and contact information of an individual within the nominating chorus who can speak on behalf of the nomination.**

Name \_\_\_\_\_

Tel: \_\_\_\_\_

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

**In 200 words or less, please explain your reason for nominating this individual or organization for this award category.** (*Optional: Attach as a separate document.*)

**Notable Achievements of the Nominee** (*Optional: Attach as a separate document.*)

**Please list any supporting documents that you are submitting on behalf of your nomination, e.g. written testimonial, concert program booklets, links to photos or a video, written testimonial.**