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| NOMINEE’s INFORMATION |
| Name of Nominee Click or tap here to enter text. |
| Street Address Click or tap here to enter text. |
| City, Postal Code Click or tap here to enter text. |
| Phone (Home) Click or tap here to enter text. (Cell)Click or tap here to enter text. |
| Email Click or tap here to enter text. |
| NOMINATOR’S INFORMATION |
| Name of Nominator Click or tap here to enter text. |
| Street Address Click or tap here to enter text. |
| City, Postal Code Click or tap here to enter text. |
| Phone (Home) Click or tap here to enter text. (Cell) Click or tap here to enter text. |
| Email Click or tap here to enter text. |
| DETAILS OF NOMINATION |
| Areas of Service (Click as many as apply)  Community  Province  National  International |
| Person’s Work/Employment/Community Connection  Click or tap here to enter text. |
| Details of Service  (Include this information in a separate document attached to this form) |
| Narrative: To support the reasons why the nominator believes this individual would be a valued recipient of a Paul Harris.  (Include this information in a separate document attached to this form) |