**Paula Foster “Wind Beneath Our Wings” Award
Nomination Form**

**Please share as much information as possible about the person being nominated focusing on their involvement and service to LSAVC.**

Date:

Name of Nominee:

Name & Address of Person (Affiliate/Club/Member) Submitting Nomination:

**NOMINEE INFORMATION**

**Local Affiliates Membership(s)/Council Information***(repeat as needed for each affiliate/club)*

Name of Club:

Member for how long?:

Offices/Committees held:

Special accomplishments:

Name of Club:

Member for how long?:

Offices/Committees held:

Special accomplishments:

**LSAVC Information**

Nominee Subscribes to the newsletter?:

Nominee attends convention(s)?:

How many conventions attended (if known):

Last convention attended (if known):

Offices/Committees Held:

Special accomplishments:

**AVSA Information**

Member for how long?:

Life Member (Y/N)?:

Nominee attends conventions:

How many conventions attended (if known):

Last convention attended (if known):

Offices/Committees held:

Special accomplishments:

**Other Information**

Activities promoting local African Violet Societies:

Activities Promoting LSAVC:

Activities Promoting AVSA:

**Brief summary of why you believe this nominee deserves the Paula Foster “Wind Beneath Our Wings” Award**

**Please return this form to President, LSAVC by October 1st for nomination to be considered for upcoming convention.**