

ARCASN
LIFETIME MEMBERSHIP NOMINATION

We the undersigned nominate (Name, Title) _____
of (place of work) _____ to be a Lifetime member
of ARCASN.

This candidate has distinguished herself or himself by helping the Region in the following means:

Please supply the candidate's home and work address

Home

Work

Signed by two nominators:

(signature)

(please print)

(signature)

(Please print)

PLEASE ATTACH ADDITIONAL INFORMATION AND/OR CV OF CANDIDATE.

There is no restriction to the number of awards that may be given in one year.