



## ENGLISH BOWLS COACHES SOCIETY NOMINATION FORM

### LONG SERVICE AWARD 2017/2018

**Nominations must be supported by the County or Regional Coach (or designated leader in the county).**

**Full details must be given, as requested, and any further details may be attached or written on the reverse of the form.**

**Nominees MUST HAVE a minimum of 15 years UNBROKEN membership**

**COUNTY  
REGION**

**COUNTY nomination by:**

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**FULL NAME OF NOMINEE  
ADDRESS**

**POST CODE  
E-MAIL**

**TELEPHONE NUMBER  
MOBILE NUMBER**

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**CURRENT MEMBERSHIP NUMBER**

**Coaching Awards:**

**Foundation/Beginner /Level 1**

**Date received**

**Club Coach/Instructor/Level 2**

**Date received**

**Senior/Level 3      Date received**

**Advanced/Level 4    Date received**

**Club(s)      Outdoor:**

**Indoor:**

**Dates of Membership    From**

**To**

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**Signed**

**Date**

**Print Name**

**Position**