



True Sport Club Award Nomination Form



Name of Nominee		
Name of Club		
Club/Facility Address		
City	Province	Postal Code
Telephone	Email	

Reference/Supporter #1	Name
Telephone	Email
Reference/Support #2	Name
Telephone	Email

Award Nomination Guidelines

- Please read the specific award description carefully and use page 2 of this form to show how this club has met the criteria, and your rationale for nominating this club for the True Sport Club Award.
- Only complete nominations will be considered.
- Nominations must be received by the submission deadline.
- Unless otherwise specified, please send your nomination to:

Gymnastics Ontario Awards Committee
 2950 Keele Street, Suite 202
 North York, ON M3M 2H2
operations@gymnasticsontario.ca
 Tel: 647-598-1989 Fax 647-344-4816



True Sport Club Award Nomination Form

Name of Nominee
Name of Club

Please use this area to describe why the club being nominated should be considered for the True Sport Club Award. Be as specific as possible and refer to the True Sport Principles and demonstrate how this club embodies the seven principles.

Submitted By _____ Date _____

Signature _____