White Rock Outstanding Canadians on the Peninsula Legacy Program Nomination Form



Name of Nominee(s):		
Address:		
Phone Number:	Email address	:
Number of years residing of	on Semiahmoo Peninsula: Is t	this award posthumous?
Is the nominee a communi	ty historical figure?	
Please explain why you are	e nominating this person:	
What is their major contrib	oution to White Rock?	
What is the current age of	the nominee? Are they awar	re of this nomination?
background, number of year	approx.) biography of the nominee an ars residing in White Rock, what brown and their contributions made to	ught them to the community,
Nominations are required the selection process.	to be submitted to the City of White F	Rock by May 1 st to be included in
Name of Nominator:		
Phone number:	Email:	
Date:	Signature:	
Submit to: Communications, City of V	White Rock, 15322 Buena Vista Aver	nue, White Rock, BC, V4B 1Y6

or email clerksoffice@whiterockcity.ca For further information, phone: 604.541.2114.

File: 2018-0540-30