

U.S. Masters Swimming - Capt. Ransom J. Arthur M.D. Award Nomination Form

NOMINEE _____
Address _____
City/State/Zip _____
Email _____
Phone _____

NOMINATOR _____
Address _____
City/State/Zip _____
Email _____
Phone _____

NATIONAL OFFICES HELD

NATIONAL COMMITTEE SERVICE

OTHER CONTRIBUTIONS ON THE NATIONAL LEVEL

ZONE & LMSC OFFICES HELD, SERVICE AND CONTRIBUTIONS

OTHER AREAS OF SERVICE RELATIVE TO USMS GOALS & OBJECTIVES

ADDITIONAL COMMENTS

ENDORSED BY _____ LMSC

SUBMITTED BY _____

NAME LMSC CHAIR OR OFFICER

DATE

NAME

DATE

Nominee's Name: _____

Date: _____

Service Summary

	USMS Board Positions	USMS Committee Positions	Other USMS Projects	Local Masters Positions & Projects
1981				
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2017				

PLEASE SUBMIT NOMINATIONS BY MARCH 15 TO: awards@usms.org
Email submissions are required!