

**2017 Ben Ardrey Volunteer Award  
NOMINATION FORM**

*Deadline to Submit: Friday, May 19, 2017*

Name of Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Person Completing This Form: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Nominee's Primary Arts/Cultural Organization Affiliation: \_\_\_\_\_

How much time has this volunteer contributed to the arts and/or culture? Please list specific activities, offices held, and awards the nominee has received: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List nominee's community involvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why is this person is deserving of the Ben Ardrey Volunteer Award? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please fill out and return to:

Deliver:

Arts Council of York County

121 E. Main St. | Rock Hill, SC 29730

Mail:

Arts Council of York County

PO Box 2797 | Rock Hill, SC 29732