

HOLT HONOURS 2010

Name of person(s) nominating

.....

I/We would like to nominate :

.....

(an individual or a group or organisation)

.....

(address of nominee)

Reasons for Nomination :

(Please refer to the criteria for nomination)

Signed: **Date:**

Address:

.....

Telephone Number: E mail address:

.....

**Town Clerk
Holt Town Council
Council Office
Community Centre
Kerridge Way
Holt, Norfolk
NR25 6DN**

MUST BE RETURNED BY 14TH FEBRUARY 2014