



100 Women Who Care Englehart & District

[100 Women Who Care Englehart & District](#) [Forms](#)

Nominations

Your Name *

So we can identify whose nomination this is.

Nominee Name *

The group, charity, or organization you'd like to nominate.

Nominee's Address *

Physical address of the nominee.

Nominee Contact

Phone or email — helps us reach them quickly if they're selected.

Confirmation *

- I confirm that my \$100 donation will be submitted by the start of the meeting.
- I have a short (5-minute or less) presentation ready in case my nomination is drawn for voting.

Both of these must be checked in order to make a nomination