



Canadian Association for Disabled Skiing

NOMINATION FORM FOR CADS NATIONAL AWARDS

AWARDS ARE PRESENTED IN CONJUNCTION WITH THE CADS SKI IMPROVEMENT & RACE DEVELOPMENT FESTIVAL HELD EACH SPRING

AWARD NAME: _____

NAME OF NOMINEE: _____

DIVISION / CLUB: _____

POSITIONS HELD: _____

NOMINATED BY: _____ (Name) _____ (Tel. #)

REASON(S) FOR NOMINATION:

(Please provide as much detail and background information as possible about the person being nominated. Attach another sheet of paper if additional space is required.)

DEADLINE FOR SUBMISSIONS: FEBRUARY 4, 2010



Please send to:

CADS National Office

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