PERPETUAL TROPHIES
2018-2019 Season

NOMINATION FORM

ATHLETE(S) NAME: _____

AGE GROUP: _____

TROPHY NOMINATION: _____

PROPOSER NAME: _____

PROPOSER ROLE: _____

REASONS (addressing relevant trophy criteria):

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1. Trophy criteria & an electronic version of this form are available on the website:
   https://www.whlac.org.au/about-us/trophies/

   Please return all nominations to the Secretary:
   P.O. Box 108, Winston Hills NSW 2153 or info@whlac.org.au
   Final nominations must be received by 5pm Friday 22 March 2019