

Bishop's Star Award Nomination Form

I nominate the following person:

Name: _____

Address _____

City _____, FL Zip code _____

Phone: _____ Email address _____

Parish _____

Please submit in writing in 250 words or less why you think the nominee should receive the Bishop's Star Award.

Your name: _____

Address _____

City _____, FL Zip code _____

Phone: _____ Email address _____

When completed forward to the Rector of your church.