



World Concertina Congress Certificate of Appreciation Nomination Application

This application must be completed for or by the nominee for World Concertina Congress Certificate of Appreciation consideration and sponsored by an existing World Concertina Congress member, and two additional recommendations.

Please note, materials submitted will not be returned.

Candidate Information:

Full Name: _____

Address: _____

City or Town: _____ State: _____ Zip Code: _____

Phone Number: _____

Email Address: _____

Sponsor's Information:

Full Name: _____

Address: _____

City or Town: _____ State: _____ Zip Code: _____

Phone Number: _____

Email Address: _____

Sponsor's Signature: _____ **Date:** _____

