



**BURY ST EDMUNDS  
TOWN COUNCIL**

# **ST EDMUND'S DAY CITIZEN OF THE YEAR AWARD**

## **ESSENTIAL CRITERIA FOR NOMINATION**

1. A citizen who has made an outstanding voluntary contribution to the good of the community of Bury St Edmunds.
2. The nominated citizen must be resident in the Town of Bury St Edmunds.
3. The nominated citizen must be over the age of 18 years at the time of nomination.
4. Members of the Town Council are not eligible for nomination.

**Note – you must ensure that the person you wish to nominate has consented to his/her nomination and has signed the nomination form before it is returned.**

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**Please return the nomination form to the address below not later than close of business on Wednesday 18 October 2017:**

**Bury St Edmunds Town Council  
Town Council Offices  
7 Angel Hill  
Bury St Edmunds  
Suffolk IP33 1UZ**

**☎ 01284 725111**

**✉ [info@burystedmunds.suffolk-tc.gov.uk](mailto:info@burystedmunds.suffolk-tc.gov.uk)  
[www.burystedmunds.suffolk-tc.gov.uk](http://www.burystedmunds.suffolk-tc.gov.uk)**



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## **NOMINATION FORM**

### **NOMINATOR'S DETAILS: [Please use BLOCK CAPITALS & BLACK INK]**

Name	.....
Address	.....
	.....Postcode.....
Signed:	..... Dated: .....

### **CITIZEN'S DETAILS: [Please use BLOCK CAPITALS & BLACK INK]**

I would like to nominate the following person for the St Edmund's Day Citizen of the Year Award:

Name	.....
Address	.....
	.....Postcode.....

### **CITIZEN'S CONSENT TO NOMINATION**

I agree to be nominated for the St Edmund's Day Citizen of the Year Award. I \*agree/do not agree to the use of information and photographs of me in the Press, on social media and on Bury St Edmunds Town Council's website. (\*Please delete as applicable)

Signed ..... Date .....

**TO BE COMPLETED BY NOMINATOR**  
**[Please use BLACK INK]**

Reason(s) for nomination:

A large rectangular box with a solid black border, containing 25 horizontal dotted lines for writing.

(continue on a separate sheet if required)