



Suzy Twist-Powell Designer of the Year Award Nomination Form

Name of person being nominated _____
(This name will be hidden from the judges.)

This person qualifies for the Suzy Twist-Powell Designer of the Year Award in the following ways (use the back of this form if you need to):

Other things you wish to express that may assist the judges in selecting your candidate:

Although it is not a requirement, a Book of Evidence is helpful.

Signed _____ Date _____

Address _____

Phone _____ Email _____

Send this completed form before May 1 to:

Siskiyou Judges Council
c/o Shirley Schmidt, Chairman
1630 Williams Highway #145
Grants Pass OR 97527/shirleyschmidt@yahoo.com