



THE LAURIE COPPING AWARD NOMINATION FORM

Name of Nominee			
Address			
State		Postcode	
Telephone	(W)	(H)	(M)
Email			
Name of Nominator			
Address			
State		Postcode	
Telephone	(W)	(H)	(M)
Email			
Signature			
I am nominating _____ because			
Name of Seconder			
Address			
State		Postcode	
Telephone	(W)	(H)	(M)
Email			
Signature			

For further information contact: Julie Long - Laurie Copping Award Convener
Tel: 02 6231 7531 Email: julie_h_long@hotmail.com or info@cbcaact.org.au
Postal Address: PO Box 5548 Hughes ACT 2605