City of Milford
Mayor's Youth Award
Group Nomination Form

Name of group nominated:_____

Group Leader's Name(s):_____

Telephone #:_____School:_____Grade:_____

Address:_____

Write a **brief description (200 words or less)** of the outstanding service that the nominee has engaged in over the past year to improve Milford and to assist its citizens. The nominees' efforts must demonstrate their dedication to strengthening the Milford Community. In an effort to convey the impact and value of the nominees' positive actions, all the nomination forms will be included with the congratulatory/invitation letters for the event.

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Your Name:_____Address:_____

Telephone #:_____Email:_____

Relationship to Nominee:_____

"Mayor's Youth Award"
Milford Youth and Family Services
150 Gulf Street
Milford, CT 06460

Fax Number: (203) 783-3238 **Email: lbartlett@ci.milford.ct.us**

Nomination Forms Must Be Received By Monday, March 2, 2009
Mayor's Youth Award Ceremony: March 26, 2009 at 4:00 pm
Location: City Hall Auditorium