**Long Service Nomination Form – FA 50 Year Award**

**Qualifying Criteria**

* 1. A minimum of 50 years’ active service;
  2. The 50 years should exclude any football played at school under the age of 16;
  3. The 50 years need not run consecutively.

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| 1. **Personal Details –** Nominator\* |

\*It is the responsibility of the Nominator to submit the nomination form to the relevant District Football Association for ratification.

|  |  |
| --- | --- |
| Name: | Telephone (Daytime): |
| Address: | Telephone (Evening): |
|  | Mobile Number: |
|  | Email Address: |
| Postcode: | Position: |

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| 1. **Personal Details –** Long Service Award Nominee |

|  |  |
| --- | --- |
| Name: | Telephone (Daytime): |
| Address: | Telephone (Evening): |
|  | Mobile Number: |
|  | Email Address: |
| Postcode: | Age: |

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| 1. **Evidence -** Please use this section to evidence the nominee’s contribution to the game. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Start date**  **(Year)** | **End date**  **(Year)** | **Number of years’ service** | **Role (Coach, Player, Referee, Administrator, Committee Member etc)** |
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Total number of years’ service to date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (must be a minimum of 50 years)

**Declaration (Nominator)** – To the best of my knowledge the information provided within this document is accurate

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

**Declaration (District FA)** – To the best of my knowledge the information provided within this document is accurate

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name** |  | **Date** |  |

|  |  |
| --- | --- |
| **Office use only** | |
| **Date received** |  |
| **Date verified** |  |

**Please complete and return to:**

Diane Horne

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