



*Half Moon Lodge #28
Rip Van Winkle Council
60 years of service to Camp Tri-Mount*

**2010 Founder's Award Nominee Information
Deadline for submission: Oct. 31**

Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Unit: _____ Date of Birth: _____ Phone (with area code): _____

Ordeal Date: _____ Brotherhood Date (if applicable): _____

Vigil Date (if applicable): _____

List any awards received:

List all Lodge positions held by nominee:

Why should this nominee receive the Founder's Award?:

Nominated by: _____

Address: _____

City: _____ State: ____ Zip: _____

Email: _____ Phone (with area code): _____