

AWARD NOMINATION FORM
Costello Syndrome Family Network
July 31 – August 4, 2019 Hunt Valley, MD



CSFN created two new awards in 2017 to celebrate the 10th biennial conference. We want to continue to recognize those who raise awareness and support those with Costello syndrome. Anyone with personal knowledge of the nominee – parent, caregiver, relative, coworker, provider or friend, for example – can submit a nomination, and nominees can be any age. Please submit a separate form for each nominee. Winners will be announced at the Welcome Reception at the conference.

The **Costello Syndrome Ambassador award** will recognize a person with Costello syndrome. Nominees should be individuals with Costello syndrome who raise awareness about Costello syndrome and show everyone the possibilities.

The **Sibling Champion award** is for siblings of individuals with Costello syndrome. Nominees should be siblings who support their sibling and show the world how wonderful their brother or sister with Costello syndrome is.

Each nomination should include:

- (1) One completed form per nominee
- (2) Your story about the nominee and why you think this person should receive the award (about 150-300 words on a separate page)
- (3) A digital photograph of the nominee

Email your nomination and attachments to: Bob@CostelloSyndromeUSA.org -or-
Mail to Sandra Taylor, 1702 Tyndall Drive, Panama City, FL 32401

Nominations must be received by May 2, 2019.

NOMINATION FORM

I would like to nominate the following person to be considered for the
(check only one) **Ambassador Award** **Sibling Champion Award**

Name of Nominee: _____ DOB: _____
mm/dd/yyyy

If Sibling Champion Award, Name of brother or sister w/CS: _____

Person submitting nomination:

Name: _____ Date: _____

Address: _____
(street, city, state, zip, country)

Email Address: _____ @ _____ Phone: () _____