

YOUNG TEXAN/TEXANNE NOMINATION FORM

OPTIMIST CLUB	South Texas DISTRICT	MONTH
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CIRCLE ONE:

FOR YOUNG TEXAN/ TEXANNE OF THE MONTH WE NOMINATE:

NAME: _____ **AGE:** _____

ADDRESS: _____

CITY: _____ **ZIP CODE:** _____

PARENTS: _____ **TELEPHONE:** _____

SCHOOL: _____ **GRADE:** _____

NOMINATED BY: (OPTIMIST MEMBER)

SIGNED: _____

ADDRESS:

PHONE:

EMAIL: