

2010 Hospice of Michigan Mask Project
Mask Celebrity Nomination Form

Nominations are due NO LATER than Feb. 29, 2010. Submit forms by **e-mail** to hospicemaskproject@hotmail.com; or by **mail** to *Hospice of Michigan, Attn: Jean Taylor, 5177 W. US 10, Suite 2, Ludington, MI 49431*; or **in person** by dropping the completed form off to Jean at the Hospice of Michigan office. If you have questions, please call Jean: (231) 845-3422.

Please **print or type** all information and use additional pages, if necessary.

Nominee Information:

Name: _____

Address: _____ City _____ State _____ ZIP: _____

Phone: Home: _____ Work: _____ E-mail: _____

- 1) The Mask Celebrities chosen this year represent someone who 'shines' in the community. What makes this person special to you and the community?

- 2) Hospice of Michigan is dedicated to helping people. How does the nominee help people?

Nominator Information:

Name: _____

Phone: _____ Email address: _____

(This information will only be used to contact you if necessary and will not be shared with anyone outside of the committee.) Please indicate if we can use your name only as the person nominating an **Unsung Hero**:

Please check one:

Yes, you may use my name as the person nominating the local celebrity for publication in association with the Mask Project for Hospice of Michigan. I understand that my phone number and email address will be kept confidential.

No, please keep my name and all other information about me confidential.

Signature of Nominator: _____ Date: _____