



Confidential Application/Nomination Form
5TH ANNUAL CLARKSVILLE AREA
CHAMBER OF COMMERCE
VALERIE HUNTER-KELLY
WOMAN IN BUSINESS AWARD

Date: _____ Nominee's Name: _____

Nominee's Address: _____

Nominee's Phone: _____ Nominee's Fax: _____

Nominee's Email: _____

ORGANIZATIONS & ACTIVITIES

Please list all community, civic, professional, business, religious, social, athletic, and other organizations the nominee is or has been a member of:

- (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____
- (6) _____
- (7) _____
- (8) _____
- (9) _____
- (10) _____

How would you describe the nominee's activity in the community? _____

Why did you nominate this Chamber Member? _____

Your name & business _____

Phone and/or email _____

**Please return to Melinda Shepard via email at melinda@clarksville.tn.us before April 30.
Award recipient will be announced at the Chamber's Annual Dinner and Gala.**