



Samaritan Counseling Center of West Texas, Inc.

Family of the Year – 2009

Nomination Form

This award is in recognition and celebration of families in our community who serve as role models for others.

Parent(s) Names: _____

Address _____

Phone _____

Children’s Names and Ages:

_____	_____
_____	_____
_____	_____
_____	_____

A committee of volunteers will choose the **Families of the Year**, in a confidential meeting, based on your nomination. Please include information about their involvement with their:

Church	Community	Family Life	Workplace (if applicable)
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Your nomination should be attached to this form. You may submit up to two (2) other letters of endorsement. Check here if you wish to remain anonymous.

Person or organization making the nomination:

Name _____ Phone _____

Address _____ City _____ Zip _____

Email _____ Date _____

Please return no later than August 1 to:

*Family of the Year Committee
Samaritan Counseling Center of West Texas, Inc.
P. O. Box 60312
Midland, TX 79711-0312
Or Fax to (432) 561-8611*

Questions? Call Liz at 432-563-4144 or 1-800-329-4144