



PO Box 2328
 Anderson, IN 46018-2328
 (866) 778/-0804 Toll Free
 (765) 608-3094 FAX
frontdesk@wchog.org
www.wchog.org

For office use:
Date Received: _____
References Received: _____

Oak Award for Christian Service Entry

Please print clearly:

Nominee

Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ Email: _____

Home Church: _____ City: _____ State: _____

How is nominee affiliated with Christian Women Connection? _____

Nominating Person or Group

Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ Email: _____

Home Church: _____ City: _____ State: _____

Please attach separate document with brief bio of nominee (300 words or less) and picture. Pictures sent electronically should be high resolution for printing. Payment must be included with entry.

Entry Fee Payment Information

Visa Master Card Discover Check (Make payable to Christian Women Connection)

Credit Card Acct Number _____ - _____ - _____ - _____

Expiration Date ____/____

CID# _____ (3-digit number located at the end of the signature panel on the back of credit card)

Name as it appears on check or credit card (Please Print) _____

Cardholders billing address if different from above _____

Phone Number where cardholder can be reached _____

Signature (required) _____

Entry Guidelines

Nominees may be young or old. They should walk with courage, endure life’s challenges and exemplify strength for today and hope for tomorrow. All nominees should be affiliated with Christian Women Connection.

Entries must include

- ✓ Entry form
- ✓ Brief Bio (300 words or less) of Nominee
- ✓ Picture of Nominee
- ✓ Entry fee of \$80 (check or credit card)

Entry Deadline: Postmarked by July 1, 2012

Entries may be submitted via mail or emailed to:

Christian Women Connection
PO Box 2328
Anderson, IN 46018-2328
Attn: Oak Award for Christian Service

Email: frontdesk@wchog.org

FAX: 765-608-3094

For Office use only	
Accepted by Christian Women Connection by:	
_____	____/____/____
Signature of Representative	Date

Print Name	