



# TOWN OF BOW

Office of the Board of Selectmen

10 Grandview Road, Bow, New Hampshire 03304

Phone (603) 228-1187 | Fax (603) 224-6680 | Website [www.bownh.gov](http://www.bownh.gov)

## NOMINATION FORM

### *Bow's Boston Post Cane*

**NOMINATIONS DUE BY SEPTEMBER 15, 2017**

Today's date: \_\_\_\_\_

#### **NOMINEE INFORMATION**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Year nominee became a Bow resident (*if there is a gap in residency, please explain*):

\_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Has Bow been the Nominee's legal domicile for at least the past 12 consecutive years? (*for example, registered to vote in Bow, able to register to vote in Bow, or registers their vehicle in Bow*)?  Yes  No

#### **PERSON MAKING THE NOMINATION**

Self (same contact information as above)

Name of person filling out this form (if other than self): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**COMMENTS:** Please use the back of the form for any additional comments.

**ELIGIBILITY CRITERIA:** The recipient must be the oldest in Town, based on the information provided as part of the application period. There is no minimum age requirement; however, the recipient must be a resident of Bow and be domiciled in Bow, as defined by the State, for at least the previous 12 consecutive years. *Adopted by the Board of Selectmen, May 2017.*

***Thank You for Your Nomination!***

**PLEASE RETURN THE COMPLETED FORM TO:** Town of Bow, Boston Post Cane Search Committee, 10 Grandview Road, Bow NH 03304. Email to [ngage@bownh.gov](mailto:ngage@bownh.gov) or fax to (603) 224-6680.