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NOMINATION FORM

CATEGORY: FUNDRAISER

Wrose Carnival

Ryan Brooks

Joshua Capper

Your name: _____

Address: _____

Postcode: _____

Telephone Number: _____

Email: _____

Please return your nomination form to: COMMUNITY STARS AWARDS, c/o Anna Frater, 3rd Floor, Margaret McMillan Tower, Prince's Way, Bradford BD1 1NN.

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