# 2018 Awards of Success

## Consent Form:

By signing this agreement, I, the Nominee:

* Verify that all the information contained in the CCDI’s Awards of Success Nomination Package is accurate and true, and that the personal information of any individual included in the form has been included with that individual’s knowledge and consent.
* Verify that, to the best of my knowledge, I meet the eligibility requirements of the CCDI’s Awards of Success.
* Agree that, if required, I will be available for an interview the week of March 17-30, 2018.
* Agree that if I am short-listed as a nominee, I permit CCDI to announce my name publicly.
* Agree that if I am short-listed as a nominee, I will attend the CCDI’s BLOOM! Gala Event in Toronto on April 26, 2018, or Calgary on May 24, 2018, or if I am not able to attend in person, I will pre-record a video acceptance speech to be played at the event.

|  |  |
| --- | --- |
|  | Click here to enter text. |
| Signature | Date |
| Click here to enter text. | Click here to enter text. |
| Name (as it should be published) | Title (as it should be published) |
| Click here to enter text. |
| Organization (as it should be published) |