



**TOWNSHIP OF WEST MILFORD
VOLUNTEER AWARD NIGHT
PRESENTATION REQUEST FORM**

PLEASE PRINT

ORGANIZATION NAME _____

ORGANIZATION ADDRESS _____

REPRESENTATIVE _____

PHONE NUMBER _____

**THE APRIL 20, 2016 VOLUNTEER AWARD NIGHT / TOWNSHIP COUNCIL
REGULAR MEETING IS BEING HELD AT 6:30 p.m. IN THE WEST MILFORD
TOWN HALL**

A MEMBER OF THE ABOVE ORGANIZATION / COMMITTEE WILL ATTEND:

NAME _____

CONTACT
NUMBER _____

DATE _____

PLEASE RETURN FORM NO LATER THAN *APRIL 8, 2016*

MAIL, FAX, EMAIL OR DELIVER FORM TO:
JUDY KEHR, OFFICE OF THE TOWNSHIP CLERK
1480 UNION VALLEY ROAD
WEST MILFORD, NJ 07480
PHONE (973) 728-2701
FAX (973) 728-2704
Email: clerksoffice1@westmilford.org