

**ATLANTA FALCONS
COMMUNITY QUARTERBACK AWARD
2009 NOMINATION FORM**

The Atlanta Falcons are pleased to announce the criteria for the 2009 Community Quarterback Award. This award honors volunteers in Georgia (ages 13 and over) who exemplify leadership and dedication to bettering their communities. We know that many organizations rely on quality volunteers to create and facilitate programs that benefit many lives throughout the State of Georgia and this award is designed to recognize and reward these individuals.

Nomination forms must be submitted with all required information, a copy of 501(c)3 documentation of the organization being served and must be postmarked by Friday, October 30. Please mail your form to: Atlanta Falcons ATTN: Community Quarterback Award, 4400 Falcon Parkway Flowery Branch, GA 30542. Individuals may nominate themselves or others for the 2009 Community Quarterback Award. One nomination form per person. There will be four winners selected this year and each will receive tickets to the Sunday, December 6 game against the Philadelphia Eagles at 1 p.m. as well as recognition on-field during pre-game activities. A \$2,000 grant from NFL Charities will also be awarded to the organization served.

Nominee Information

Please provide the following information regarding the nominated individual.

First and Last Name: _____

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

Telephone #: _____ Age: _____ Email address: _____

How did you hear about the program? _____

Name of non-profit 501(c)3 organization served by nominee: _____

Street Address of non-profit 501(c)3 organization: _____

City: _____ State: _____ Zip: _____

Telephone # of non-profit 501(c)3 organization: _____

Description of non-profit 501(c)3 organization (please include website if applicable): _____

Nominator Information

Please leave this section blank if you are nominating yourself.

First and Last Name: _____

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

Telephone #: _____ Email address: _____

In what capacity do you know the nominee and for how long? _____

Description of Volunteer Work

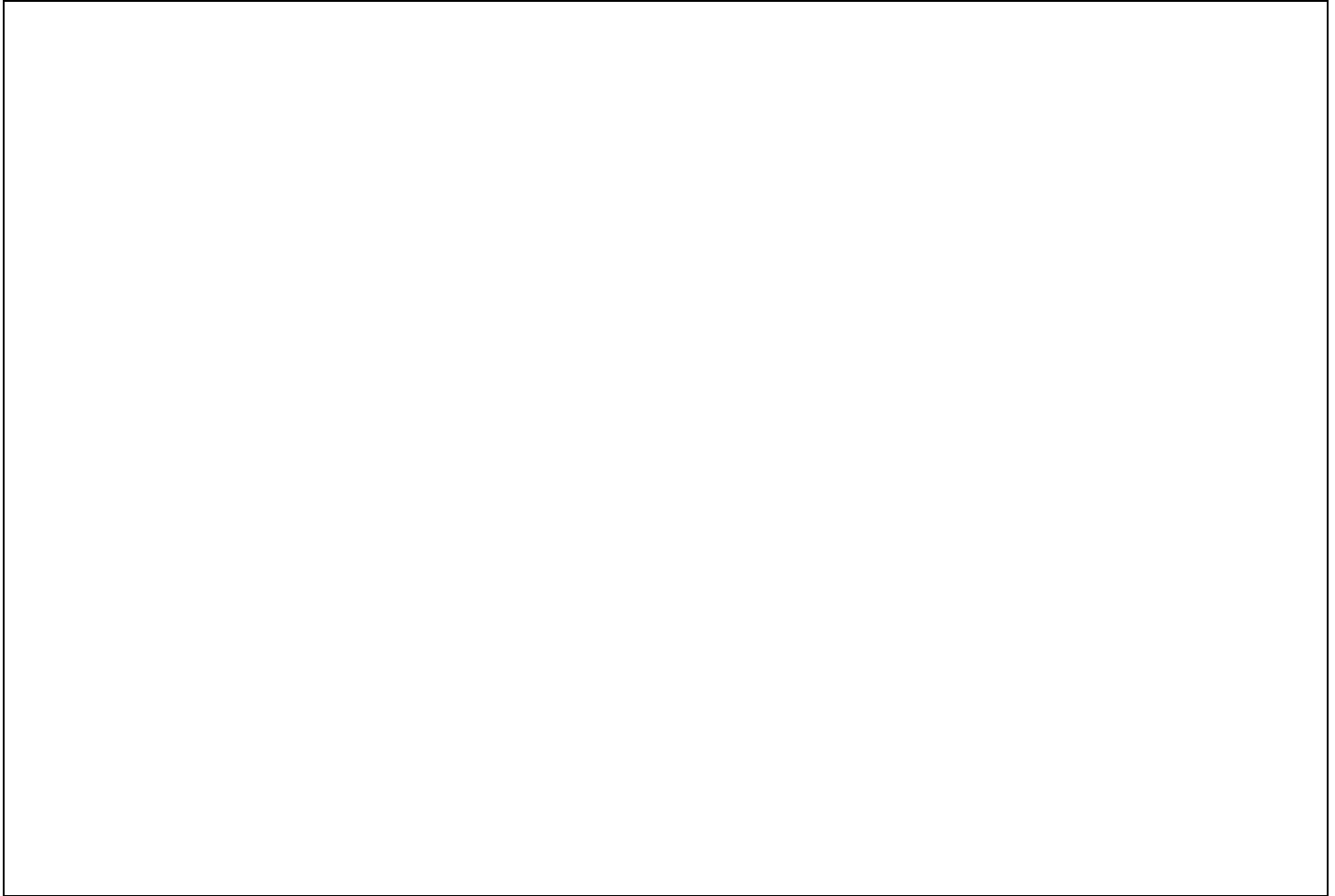
Please complete all questions.

Please describe volunteer work and year(s) served with the organization.

Discuss how volunteer work of the nominee has impacted the lives of others in the community.

Why are you or the person being nominated most deserving of this award?

Please feel free to include any additional information.



*** Please attach a copy of the organizations 501(c) 3 status form. Your nomination will be incomplete without this information.***