

Kerr-Tar Council of Regional Council Covernments Namination Form **Governments Nomination Form**

Nominee Information

First Name:	
Last Name:	
Address:	
City/State/Zip:	
Phone:	
Email:	
Outstar Outstar Outstar Outstar Region	
Your Informat	ion
First Name:	
Last Name:	
Address:	
City/State/Zip:	
Phone:	
Email:	