**CHERBOURG CONTACT CENTRE SHIRT DESIGN COMPETITION**

**NOMINATION FORM**

**Please complete and sign this nomination form then email with your design to** **referencegroupsec@dtis.qld.gov.au**

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| --- |
| **Contact details:** |
| **Full name:** |  |
| **Address** |  |
| **Email:** |  | **Phone:** |  |
| **Attached shirt design to email** |  |
| **Cultural story (description about your design)** |  |
| **Please sign to endorse use of the winning entry on the Contact Centre shirt and acknowledgment that the design is your own work** | **Signature:**  |  | **Date:** |  |

**If you require any assistance with your entry, please talk to Charmaine or Noella at the Cherbourg Council reception desk.**