

# Hometown Hero Award

## Presented by WHKP and Park Ridge Health

### Nomination Form

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Please complete this form and submit to WHKP for consideration. Applications may be dropped off at the Broadcast House or in the main lobby at Park Ridge Health, mailed to "Hometown Hero" c/o WHKP located at 1450 7<sup>th</sup> Avenue West, Hendersonville, NC 28792, or scanned and emailed to [info@whkp.com](mailto:info@whkp.com)

**Your Information:**

Name \_\_\_\_\_

Phone number \_\_\_\_\_

**Your Nominee's Information:**

Name \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

Please describe your reason(s) for nominating this person as a Hometown Hero

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