



**INDEPENDENT
POOL & SPA
SERVICE ASSOCIATION, INC.**

EXECUTIVE OFFICE
PO BOX 3367
ROCKLIN, CA 95677
888-360-9505
888-368-0432 (FAX)
info@ipssa.com
www.ipssa.com

TERRY COWLES MEMORIAL AWARD Nomination Form

(Rev. 6/28/18)

History: In 2006 IPSSA, Inc. initiated the Terry Cowles Memorial Award. This award will be given each year to the IPSSA member who best meets the criteria outlined below. Terry Cowles had been a longtime outstanding member of IPSSA who had been involved in the creation of the IPSSA Benevolent Fund.

Award: The award consists of an inscribed plaque and complimentary dinner tickets, hotel room for the recipient and a guest to attend the next annual IPSSA leadership banquet, and a check in the amount of \$1,000.00. The award will be presented at the IPSSA leadership banquet.

Procedure: Each Region is eligible to nominate a member for this award. Region nominations are to be selected by the incumbent Region Boards at their 3rd quarterly Board Meeting. Nominations should be delivered to the IPSSA, Inc. Executive Office using this form not later than October 20 for consideration at the November BORD Meeting. The incumbent Board of Regional Directors shall make the selection of that year's recipient at their November meeting.

Personal Information:

Nominee's Name _____

Year joined IPSSA) _____ Region & Chapter) _____

Criteria: The member being nominated shall have contributed to the improvement of IPSSA and/or the pool service industry by any or all of the following. (Please describe nominee's significant contributions below):

1. Demonstrates professionalism (known to be an excellent technician, pursues course work to improve skills, conducts business in an ethical and professional manner, etc.).

2. Contributes to IPSSA (willingly does sick route when called upon; serves as chapter, region, or other officer or chairman within the organization, etc.).

3. Assists other service industry members (helps chapter members or other pool service professionals with chemical problems, difficult repairs, either through hands-on assistance or by sharing information).

4. Contributes to his/her community (participates in church, charitable, or other community activities).

Additional comments to support this nomination may be added, as well as additional pages if needed.

Submitted by _____ Phone No. _____

Return this form via e-mail to: rose@ipssa.com by October 20.