



Gold Wing Road Riders Association

South Carolina District

Individual of the Year Requirements

The Individual of the Year Program is a compliment program to the Couple of the Year Program and is intended to honor members that do not qualify for the Couple of the Year Program. Many individuals contribute a great deal to their chapter and GWRRA as a whole. This program gives chapters a way to acknowledge these individual members.

1. The Individual of the Year must be a member in good standing in the Gold Wing Road Riders Association (GWRRA).
2. The Individual of the Year's spouse or significant other can be a member of GWRRA, but the spouse or significant other **cannot be** an actively participating member of the chapter. In other words, the spouse or significant other occasionally comes to a gathering or chapter social but for the most part the members usually see that member without their spouse or significant other (an example is: it could be that their spouse or significant other is in the military and is gone for a better part of a year). It **does not mean** that a member's spouse or significant other can't come to a chapter event; it means they are not a regular participant in chapter life. You may also find that the member's spouse or significant other is not a member of GWRRA.
3. The Individual cannot qualify for nomination in the Couple of the Year Program in the same year.

This program is not designed to recognize one person in a couple who is more outgoing than the other and wants to compete but the other does not. If that is the case, they are a couple and fall under the Couple of the Year Program.

The Chapter Individual of the Year has the choice to or not to have their name submitted to the District for consideration in the District Individual of the Year selection.

**South Carolina GWRRA Individual of the Year
Nomination Form**
(Type or Print Legibly)

Candidates Information

Name _____

Chapter Designation _____

Address: _____

City, State, Zip: _____

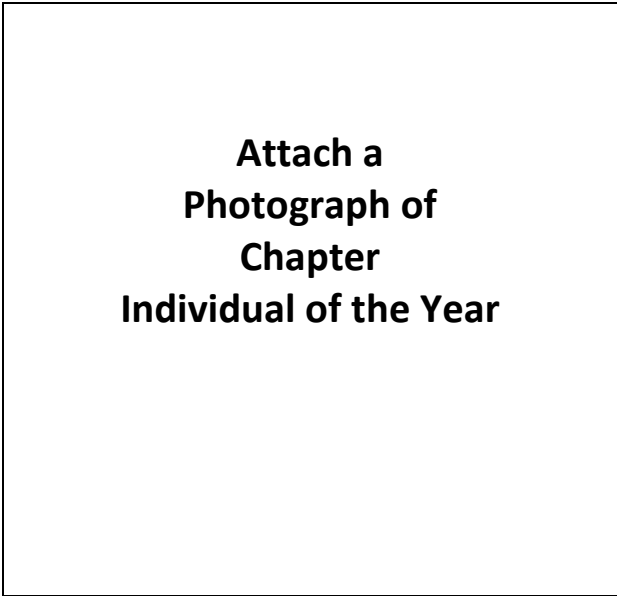
Telephone: _____

E-mail Address: _____

GWRRA member Number: _____

Exp. Date: _____ Join Date: _____

Full Member _____ Associate Member _____



**South Carolina GWRRA Individual of the Year
Nominator's Comments**

Name of Nominator: _____

Position: _____

Chapter Name (Include Designation/City/District): _____

Comments:

Signature: _____ Date: _____

**South Carolina GWRRA Individual of the Year
Nominee's Narrative**

1. Brief Personal Background (e.g. family, work, motorcycling history, etc.)

2. GWRRA Participation and Involvement (e.g. positions held, rallies and activities attended-list chronologically).

3. Rider Education Levels- Current _____