

GLENN R. MASTERSON MEMORIAL AWARD

This award has been initiated by the Canadian Sport Parachuting Association to honour the memory of Glenn R. Masterson. Mr. Masterson was a pioneer in the sport of parachuting, a founding member of the Parachute Club of Canada (now CSPA), and an active supporter of parachuting in Canada, until his untimely death in June of 1975.

The GRMA is the principal and primary commendation in its class. Recipients of this honour received a suitable replica of the award with the original remaining in possession of the CSPA.

- 1. The GRMA may be awarded to a Registered Participant or a Member.
- 2. The GRMA is not to be awarded for any year prior to 1976.
- 3. The nominees need not be Canadian citizens.
- 4. The GRMA may be awarded for:
 - Heroic action; or
 - Contributing to the advancement of Canadian Sport Parachuting
- 5. Consideration will be given to nominees for continuous effort rather than for a single effort.
- 6. Appropriate effort, in the case of CSPA Registered Participants, usually means that the recipient has previously been awarded the CSPA Cathy Johnson Service for previous contributions.
- 7. The GRMA is the highest honour CSPA can bestow and carries with it special prestige. The presentation of this award shall only be made to individuals whose efforts have had special impact and have been of a stature above and beyond that normally of expected of volunteers.

Nomination and Selection Procedure:

- 1. Nominations should be submitted to the CSPA office
 - a. By mail: 204-1468 Laurier St. Rockland, ON K4K 1C7
 - b. By email: <u>office@cspa.ca</u>
 - c. By fax: 613-916-6008
 - d. Or in person
- 2. The nomination must be received seven (7) business days before the Annual General Meeting.
- 3. A committee of three or more, as designated by the Board of Directors, will meet prior to, or during the Annual General Meeting to select the recipient of the Award for the previous year.
- 4. The committee may decide not to select an Award recipient in any one particular year.

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Nomination Form

First Name:

Last Name:

Date of Nomination:

DD/MM/YYYY

Reasons for Nomination:

Name of Nominators (3 required):

Name:	Signature:
Name:	Signature:
Name:	Signature:

Nominations will not be carried forward. Nominees not selected, or if more than one nominee's name has been offered, may be re-nominated in a future year.

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