



## Town of Stellarton

PO Box 2200, Stellarton, NS B0K 1S0  
Phone: (902) 752-2114 Fax: (902) 755-4105  
[www.stellarton.ca](http://www.stellarton.ca)

To whom it may concern:

The Town of Stellarton holds a Volunteer Recognition Reception annually to celebrate community volunteers. We are very pleased to be preparing for this special event once again. It's an evening we look forward to celebrating each year!

There are many community groups with volunteers who serve the residents of Stellarton. This tradition provides an opportunity for community and sport groups to recognize these outstanding volunteers. You are invited to participate in this event by selecting a volunteer who will be honoured by the Town. To assist you, a volunteer recognition form is included. Once you make your selection, your organization is asked to complete the enclosed volunteer information form and forward it to the Town of Stellarton **no later than Wednesday, March 19, 2025.**

Please be aware that the information provided on your Volunteer Representative Form is important, as it is the basis for selecting the *Francis Bud MacKay Volunteer of the Year*.

The Volunteer Reception will be held on Thursday, May 1, 2025 beginning at 7pm at the Stellarton Fire Hall. To ensure that we have the space to recognize our nominees, as well as their families, we ask that each nominating organization has 1-2 representatives in attendance to support the nominees. I will connect with nominees in the spring regarding their guests, but I ask that you please RSVP for your organization's representatives by April 25, 2025.

On behalf of Council and the Town of Stellarton, I thank you for your outstanding community work. If you have any questions, please contact me at the Town Office at (902) 752-2114.

You can submit your volunteer form to: [paige.draper@stellarton.ca](mailto:paige.draper@stellarton.ca)

Mail to: PO Box 2200, Stellarton, NS B0K 1S0;

Or drop off at Stellarton Town Hall between Monday to Friday, 8:30am-4:30pm.

Respectfully,

Paige Draper  
Marketing & Communications



**Town of Stellarton**  
Volunteer Representative Information

Name of Organization: \_\_\_\_\_

Name of Representative Volunteer: \_\_\_\_\_

Representative Volunteer's Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ (Home): \_\_\_\_\_

Email: \_\_\_\_\_

Please write a description of the volunteer work the representative volunteer has done for your organization (ie. Number of years of service, offices/positions held, duties performed, quality of volunteer service; what they mean to your organization, any relevant information). Use the back of this form if you wish. *(This information will be shared at the Town's reception.)*

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Please list volunteer work the representative volunteer has done for other community organizations. *(This information will be shared at the Town's reception.)*

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Submitted by: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_