

AARON AWARD

Annually, the Christian Council on Persons with Disabilities honors an individual who has recognized an unmet ministry need within the disability community and then worked tirelessly and compassionately to see it filled.

Now's your chance to shine the spotlight of gratitude on someone who has accomplished what "couldn't be done" or blazed a new trail for others to follow. Fill in the information requested, and mail this form to:

CCPD
ATTN: Executive Director
1100 West 42nd Street, Suite 223
Indianapolis, IN 46208
(317) 923-CCPD

Name of Vision Award Nominee: _____

Their Address: _____

City/State/Zip: _____

Their Phone: () _____ Email: _____



Your Name: _____

Your Address: _____

City/State/Zip: _____

Your Phone: () _____ Email: _____



Name of the Disability Ministry they impacted: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____



*On the reverse side of this page, please give detailed information as to why you are nominating this individual. Please include the number of years they have been involved with the project or ministry and any relevant documentation. **Thank you!***