

OLTA Honorary Life Member Award Nomination Form

Nominee Name _____

Your Name _____

Your Phone Number _____ Your Email Address _____

Nominee Information

Nominee's Past OLTA Service (i.e. service on Board of Trustees, Committees, Task Forces)

Please include nominee's significant contributions, over a sustained period of time, to OLTA and the title insurance industry in Ohio in the form of leadership, teaching (including seminar speaking), writing, mentorship of other members, volunteerism in support of the industry and the Association, and/or promotion of the interests of the industry and OLTA.

Has the nominee served on the Board of Trustees in the last 3 years?

Yes No

Has the nominee been engaged in the title industry for at least 20 years?

Yes No

Has the nominee been a member in good standing of the OLTA for at least 10 cumulative years?

Yes No

Is the nominee at least 60 years of age?

Yes No

I attest that the information above is, to the best of my knowledge, accurate and truthful.

Your Signature _____