ICELANDIC FESTIVAL OF MANITOBA®

107-94 1ST Avenue
Gimli, Manitoba
R0C 1B1 | CANADA

Fjallkona Nomination Form

Name of Nominee: _____

Address:_____

Email: _____

Phone Number: _____

Name of person putting forward the nomination: _____

Address:_____

Email: _____

Phone Number: _____

Eligibility Questions:

- Is the Nominee a female over 18 years of age? _____
- Does the Nominee live in Manitoba? _____
- Does the Nominee have traceable Icelandic ancestry? _____
- Is the Nominee willing/able to travel to represent the Festival? _____

Please detail the contributions made to the Canadian Icelandic Community and/or to Icelandic culture and heritage. Add a second page if more space is needed.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Additional information/verification may be requested by the review committee

Please return to info@icelandicfestival.com