



Longevity Recognition Award

The purpose of the OMGA Longevity Award is to honor and thank Oregon Master Gardeners who have been loyal and dedicated volunteers for 20, 30, 40 or more years. Too often these amazing dedicated volunteers are taken for granted. These awards are one way to say "THANK YOU".

The work of these volunteers makes an educational difference for neighbors, schools and communities. The projects on which they have worked are astounding and outstanding. As of 2017 more than 150 Oregon Master Gardeners have been recognized.

The Master Gardener recipients will be recognized at the OMGA's Annual Educational Event Awards Banquet during the G2 conference and featured in the Gardener's Pen Newsletter. All recipients are invited and encouraged to attend and be honored.

Requirements:

Each Oregon MG who completed Master Gardener Training 20+ years ago and who has continuously paid their dues is eligible to receive this award. All award recipients will receive a certificate. The 20-year members will receive a "Twenty Years of Service" orange service bar for their badge, whereas the 30-year and 40-year members will receive a unique recognition pin.

If your chapter has members eligible for a Longevity Award who have not received it or who are eligible for the next level of the award, please send their names and the year they graduated to the committee chair. They receive both a certificate and the appropriate award.

In the future, a "Wall of Honor" will be developed for the OMGA Website listing all the Oregon Master Gardener Longevity Award winners. OMGA hopes this small token will demonstrate our appreciation of these valuable volunteers.

Fill out the attached OMGA Longevity Awards form and return to committee chair.

Due Date for Submission is MAY 15th of current year

Committee Chair: Marcia Sherry email: msherry114@gmail.com

OMGA Longevity Awards

Please fill out the form below and submit by **May 15th** of current year to:

Marcia Sherry: msherry114@gmail.com or 2611 SE 25th Ave., Battle Ground, WA 98604

Chapter: _____ Contact Person: _____

Email: _____ Phone: _____

20 year Recipients:

FIRST NAME	LAST NAME	YEAR

30 year Recipients:

FIRST NAME	LAST NAME	YEAR

40 year Recipients:

FIRST NAME	LAST NAME	YEAR