



Do you know a special BVL Volunteer? Nominate him/her for Volunteer of the Month!

BVL Volunteer Spotlight Form

Date: _____

Your Name: _____

Address: _____

City, State, ZIP: _____

Email address: _____

Volunteer's Name: _____

Volunteer's Organization (if applicable): _____

When and why did they become involved with BVL?

BVL Activities Undertaken:

This form can be completed and mailed to:

BVL

11350 Random Hills Road Suite #800

Fairfax, VA 22030

Or emailed to: info@bvl.org

PLEASE include photo if possible!