2025 CACT Annual Meeting & Awards Luncheon

Awardee Form



Wednesday, June 18, 2025

Registration 11:15 am Program & Lunch 11:30 am – 1:00 pm Indian Hill Country Club, 111 Golf St, Newington

Celebrate our progress in promoting and improving public transportation in Connecticut at the Annual CACT Meeting & Awards Event. All CACT members are invited to nominate an individual or individuals to receive the following awards.

2025 Excellence in Transportation Award

The **Excellence in Transportation Award** is given by CACT members to recognize the people within their agency who excel at their jobs in transportation but rarely have a formal recognition of their efforts by those in the public transportation industry. Honor individuals from your agency with this award and let everyone experience their appreciative smiles and heartfelt thanks at the Annual Meeting & Awards Event.

Submission Deadline: May 20, 2025 COST: \$85 per nominee, includes the Award & program booklet SUBMIT: jpeg photo of awardee (labeled with nominee's name) & brief up to 3 paragraphs long description about why the individual is being selected. EMAIL INFO & JPEG Photo TO: mary@cact.info

2025 Friends of Public Transportation Award

Nominations by CACT Members only are being solicited for The Friends of Public Transportation Award which is given in recognition of outstanding leadership and dedication to the enhancement of public transportation in the State of Connecticut. CACT members may submit a nomination for the Award. The CACT Board will determine the final awardees. The awardees lunch is free.

Submission Deadline: May 20, 2025 COST: No cost includes the Award & program booklet

Yes, I have emailed the nominee jpeg photo and bio _____

SUBMIT: jpeg photo of awardee (labeled with nominee's name) & brief up to 3 paragraphs long description about why the individual is being selected. **EMAIL INFO & JPEG Photo TO: mary@cact.info**

Check which award:	Excellence in Transportation	on Frie	ends of Public Tran	sportation Award _	
Organization:					
Awardee's Name:					
Awardee's email:					
Nominated by:					
Nominee email:					
Nominee phone #:					
Total Amount Due:	Chec	k #			

RETURN YOUR PAYMENT along with this form to: (no credit cards accepted):

CACT, 148 Bahre Corner Rd, Canton, CT 06019

If you have several nominees, please attach all names on a separate sheet

Date emailed