

	CS – Tourism Awards Nomination	Community Services
	Tourism Awards Nomination	

Contact Information of Nominator	SECTION 1
Name _____ Group/Organization/Business (if applicable) _____ Address _____ City _____ Postal Code _____ Cell Phone _____ Email _____	

Contact Information of Nominee	SECTION 2
Name _____ Group/Organization/Business (if applicable) _____ Address _____ City _____ Postal Code _____ Cell Phone _____ Email _____	

Award	SECTION 3
Select the appropriate award. A separate form is required if nomination is made for more than one award.	
Legend Award	Tourism Excellence Award

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Nomination Detail	SECTION 4
Reason for nomination. Attach additional information or relevant support materials.	
Privacy Statement	SECTION 5
Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose of tourism award selection. Questions about the collection and use of the information may be directed to the Supervisor of Tourism and Events, Community Services - specialevents@stjohns.ca	
Please send completed form by February 28 th , 2024, to: specialevents@stjohns.ca	For more information: Email: specialevents@stjohns.ca Call: 709-570-2186