

	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		
<p>Reason for nomination. Attach additional information or relevant support materials.</p>			
Privacy Notice	SECTION 5		
<p>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 Manager of Tourism, Culture and Business Growth - specialevents@stjohns.ca</p>			
<table> <tr> <td data-bbox="82 1352 933 1621"> <p>Please send completed form by Sunday, March 1st, 2026, to: specialevents@stjohns.ca</p> </td> <td data-bbox="933 1352 1539 1621"> <p>For more information: Email: specialevents@stjohns.ca Call: 709-570-2186</p> </td> </tr> </table>		<p>Please send completed form by Sunday, March 1st, 2026, to: specialevents@stjohns.ca</p>	<p>For more information: Email: specialevents@stjohns.ca Call: 709-570-2186</p>
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