

Deadline: May 1



Minnesota Turkey Growers Association
Nomination Form

Allied Lifetime Achievement Award

Nominee Information

Name: _____

Company: _____

City/State: _____

Telephone: _____

Email Address: _____

Spouse's Name _____

Child(ren)'s
Name(s) _____

Years in Allied Industry (if known): _____

Is there someone else we should contact for
additional information? _____

Please describe nominee's accomplishments and/or extent of involvement in Minnesota's turkey industry and the MTGA that you believe qualifies this person for the MTGA Allied Lifetime Achievement Award:

List any other reasons why you believe this person should be chosen as the MTGA Allied Lifetime Achievement Award: (Attach extra sheets if needed.)

Nominated by: _____ Phone: _____ Email: _____

Return nomination form by May1 to:

Minnesota Turkey Growers Association
Teresa Sorenson
108 Marty Drive • Buffalo, MN 55313-9338
FAX 763/682-5546 • tsorenson@minnesotaturkey.com