

# Promoter of the Year Award – Nomination Form

## Nominee Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(if known) \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is there someone else we should contact for additional information? \_\_\_\_\_

**Please describe nominee's accomplishments that you believe qualifies this person for the Promoter of the Year Award:**


**List any other reasons why you believe this nominee should be chosen as Promoter of the Year Award recipient: (Attach extra sheets if needed.)**


Nominated by: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Return nomination form to:

Minnesota Turkey Research & Promotion Council

108 Marty Drive • Buffalo, MN 55313-9338 • FAX 763/682-5546 • [ldurben@minnesotaturkey.com](mailto:ldurben@minnesotaturkey.com)