



2019 Nominations Submission List

Hotel's Nominations Main Contact: *This person will be contacted if there are any questions regarding the nominations submitted.*

Name: _____ Job Title: _____

Hotel: _____

Address: _____ City: _____ Postal Code: _____

Email: _____ Phone Number: _____

Please list below all nominees you are submitting from your hotel. **Please note spelling of names provided in this form will be used for all event printing materials** including nominees' certificates and awards for winners.

The hotel's General Manager's signature is required in this form as confirmation of his/ her approval of all nominations being submitted. Nominations will **not** be accepted if nominees are not included in the below list.

Nominee(s) First & Last Name

Nomination Category

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____
16. _____	_____
17. _____	_____
18. _____	_____

General Manager's Authorization:

General Manager's Name: _____ Signature: _____ Date: _____

*****AWARD WINNERS WILL NOT BE ANNOUNCED BEFORE THE EVENT*****

Please submit ONE SIGNED copy of this form with your nominations. Past year award nominees are permitted to be nominated again.