PRIDE AWARD NOMINATION

Please Include

Name of Nominee: _____

Individual_____ Organization_____ Business_____

Nominee Contact Information:

Address_____

City_____ State_____ Zip Code_____

Business Telephone_____ Cell Phone_____

Email_____

Nominated by: _____ Date_____

Phone Number _____ Email: _____

Alternate Contact _____ Phone Number _____

REASON FOR NOMINATION: Please follow the criteria listed on the cover page.
Include supporting documentation up to 2 pages.

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Please return this form by emailing to Chamber@parmaareachamber.org or download and mail form to:

Parma Area Chamber of Commerce – Pride Award
5790 Ridge Rd., Parma OH 44129
Phone: 440-886-1700 **Fax:** 440-886-1770
Website: www.parmaareachamber.org