



RETAILER OF THE YEAR



ENTRY FORM – Due by Monday, March 3, 2017

BUSINESS NOMINEE:

Independent Store(s)

Chain Store

Franchise Location(s)

If Independent Store, please provide Store Owner information, if Franchise/Chain Store, please provide Corporate Contact to Verify Entry:

Name _____ Phone: _____ Website: _____

Name of Business: _____ Number of store locations in NC: _____

Mailing address: _____

YOUR CONTACT INFORMATION:

Your name _____ Phone: _____ Email: _____

Position (if employee) or relationship to nominee _____

TELL US ABOUT THE NOMINEE:

Please provide information about the nominee in letter/essay format.

Things to include:

- Why you feel this business should be recognized as a 2017 Retailer of the Year,
- Community service, customer service/relationships, innovation and contribution to the industry, special achievements, employee mentorship and leadership,
- Business story (how/when it started, early struggles and obstacles), and
- Letters of support, newspaper clippings, and other information.

Submit completed entry forms -

Email: jeannee@ncrma.org

Mail: Retailer of the Year, c/o NC Retail Merchants Assn., PO Box 1030, Raleigh, NC 27602
or **Fax:** 919-832-0812

Open to NCRMA members only