

# MERCHANDISING AWARD OF EXCELLENCE

SUPER FLORAL  SYNDICATE SALES

## entry form

Name of store: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ ZIP Code/Postal Code: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Names and titles of people who created the display: \_\_\_\_\_

Supervisor's name and title: \_\_\_\_\_

Supervisor's phone number: \_\_\_\_\_

Supervisor's email address: \_\_\_\_\_

Theme or type of display: \_\_\_\_\_

**IMPORTANT:** Provide the name of the person who will accept the award at the International Floriculture Expo: \_\_\_\_\_

If selected as a winner, the name(s) on the award should be: \_\_\_\_\_

I understand that no materials will be returned and that they may be used for publication in *Super Floral* or for other purposes deemed appropriate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ENTRIES MUST BE POSTMARKED BY APRIL 30**

