



GNJMA

2020 Motorcoach Professional Awards Application

Company (Member) Name:	
Nominee Name:	
Number of Years with the Company:	
Number of Years with No Accidents (Drivers Only):	
Number of Trips to Any Destination per Year (Drivers Only):	
Name, Email and Telephone Number of Person Submitting Application:	
In 50 words or less, please describe why your company has selected this nominee to receive the Motorcoach Professional Award . Please include any special attributes, awards or training. If printing, please print neatly. <i>Thank you!</i>	

Please send the completed application to:
Pattie Cowley, Executive Director: GNJMA P.O. Box 186 Washington, NJ 07882 or
Email: pcowley@gnjma.com