



Snail of Approval Nomination Form

Please return completed nomination form to:

Slow Food North Shore
PO Box 384
Old Westbury, NY 11568

I am member of **Slow Food North Shore** (please circle): Yes/No
(You must be a member to nominate a restaurant, artisan, or yourself)

Your Info:

Name _____

Street Address _____

City _____ Zip Code _____

Phone _____ Email _____

Name of Restaurant/food business nominated: _____

Do you have any direct or indirect financial interest in the restaurant or business being nominated? If so please explain. (Answer to this question is not necessary for self-nominating restaurants and businesses.)

Why are you nominating this business/restaurant for **Snail of Approval**?

Main Contact (Restaurant or Business Owner): _____

Address: _____

Email: _____ Phone: _____