**Company Name:**

Please complete this form with **three testimonials from clients who have given their permission to be contacted and their contact details** and upload along with your Category Entry Form on the “Submit and Entry page.

|  |  |
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| ***Testimonial 1*** | |
| **Name**    **Job Title** |  |
| **Company Name**  **Address**  **Telephone**  **Email** |  |
| **Testimonial** |  |
| **Circumstances of partnerships** |  |

|  |  |
| --- | --- |
| ***Testimonial 2*** | |
| **Name**  **Job Title** |  |
| **Company Name**  **Address**  **Telephone**  **Email** |  |
| **Testimonial** |  |
| **Circumstances of partnerships** |  |

|  |  |
| --- | --- |
| ***Testimonial 3*** | |
| **Name**    **Job Title** |  |
| **Company Name**  **Address**  **Telephone**  **Email** |  |
| **Testimonial** |  |
| **Circumstances of partnerships** |  |