



2026 Celebrate Success Business Awards



Health & Wellness Award

Sponsored by



Wealth Management
Dominion Securities

Zazula Wealth Management Group
RBC Commercial Financial Services

The 2026 **Health & Wellness Award** will be presented to a company or business such as an alternative health care provider; Pharmacist; Natural/homeopath; Registered Massage Therapist; Fitness Centre; Personal Trainer; Optometrist; Dentist; Nurse Practitioner; Doctor; Medical Clinic; Physiotherapist; or Chiropractor. The business or company has demonstrated:

- 1) a commitment to delivering high-value service to its customers or clients; and/or
- 2) business growth; and/or
- 3) innovation; and/or
- 4) involvement in the community

Eligible businesses will have been operating for at least 3 years (as of December 31, 2025).

Please provide the link to the website of your business and the business's social media links. (Judges MAY wish to visit)

Please complete this application in its entirety, restricting your comments to the specified word count as defined; point form may be used. Microsoft Word documents will be accepted in electronic format.

OPTION: Provide a video of less than 5 minutes in length that answers the following questions.

(NOTE: A video will not be reviewed if it exceeds 5 minutes).

Name of Company

Years in Operation

Contact Name & Title

Email Address

Phone Number

1. Please provide a brief description of your business. **(50 words maximum)**.
2. Please describe how your business has grown and evolved **(100 words maximum)**
3. Please describe the value your business places on customer service, how it is delivered and how it is measured **(150 words maximum)**
4. Please describe any innovations your business has developed or adopted (could include unique product or service; and/or marketing; and/or other innovation(s) which sets it apart from competitors) **(100 words maximum)**
5. Please describe how your business supports the community-at-large via sponsorships, donations, etc. **(100 words maximum)**.
6. Please describe how your business ensures your employees are in a safe work environment **(50 words maximum)**
7. Number of Full Time Staff _____ Number of Part Time Staff _____

Please call the Yorkton Chamber office (306-783-4368) if you have any questions. Application **deadline is NOON Tuesday March 17**. Please submit completed application via Google Forms OR by email to info@yorktonchamber.com

This page must accompany all applications

CONSENT

I hereby consent to have my application considered for the Yorkton Chamber of Commerce Celebrate Success Business Awards. I have read and comply with the rules of eligibility.

Name of Authorized Person (please print) _____

Signature of Authorized Person _____

Date _____

The Chamber staff will send to the Applicant confirmation of receipt of the application. If no confirmation is received, **it is the responsibility of the applicant** to contact the Chamber either by telephone (306-783-4368) or email (info@yorktonchamber.com) to ensure the application is received.