

PLANNING EXCELLENCE AWARDS

Entry FORM Application

Title of Entry: _____

Category: _____

On behalf of: _____

(community, company, organization, client)

Contact Person: _____

Address: _____

E-mail: _____ **Telephone:** _____

<p>Name(s) Other individuals who should be credited in the event of an award</p>	<p>CIP Membership Category</p>	<p>Organization(s)</p>
<p>If selected for an award, by means of this completed form you agree to submit additional material and/or information. Please supply the name(s) and contact information for the following:</p> <p>Materials/Information Required</p>	<p>Contact Name(s)</p>	<p>Telephone Numbers and E-mail Addresses</p>
<p>Six (6) copies of the project in CD Format</p>		
<p>Short power point presentation (3 minute maximum)</p>		
<p>Short written presentation for a news release, etc.</p>		

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