AWARDS ENTRY FORM

OFFICIAL ENTRANT:
Name: ____________________________________________________________

Is Entrant a CURRENT Member of ASLA?  NO  YES - What Level?

☐ ASLA  ☐ Student ASLA

Check One:  ☐ FASLA  ☐ Student Affiliate ASLA

☐ Associate ASLA  ☐ International ASLA

Non-members entering multiple projects must pay the non-member fee for the first entry and may pay the member fee for any additional entries.

FIRM / SCHOOL / AGENCY: ____________________________________________

CONTACT NAME: __________________________________________________

STREET ADDRESS: _________________________________________________

CITY / STATE / ZIP: _______________________________________________

PHONE: __________________ EMAIL: ________________________________

You will receive confirmation of receipt and access to submission folder BY EMAIL. Please write legibly.

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<tr>
<th>CATEGORY</th>
<th>FEE</th>
<th>QTY.</th>
<th>SUBTOTAL</th>
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Total

$_____________

TO REGISTER AN AWARD VISIT: http://www.aslacentralstates.org/2015-awards/

MAIL COMPLETED FORM TO:
John Mabry
3202 East 21st Street Suite 100
Tulsa, OK 74105

Office use only

Received by: DATE: