

Division One Entry Form

This form must be completed for each entry and securely attached to the front of the entry. Please attach a second copy of the entry form that can be easily removed. Be sure to sign the bottom of this form prior to submitting

PLEASE CHECK THE SUBDIVISION AND COMPLETE THE NAME OF THE CATEGORY OF YOUR ENTRY:

DIVISION ONE A PROGRAMS

Category Number _____

Category Name _____

DIVISION ONE B PROJECTS

Category Number _____

Category Name _____

ENTRY CLASSIFICATION

Standard Entry

Registered 501(c)3 organization*

**You must provide a copy of your organization's W-9 form indicating tax exempt status.*

Title of Entry

Name of Person Submitting Entry

Title

Are you a member of the PRSA Buffalo Niagara Chapter? Yes No

Organization

Address

City/State/Zip

Business Phone/Ext

Email Address

Name of Client (If Entrant is an agency/counseling firm)

IF ENTRY RECEIVES AN AWARD, IT SHOULD DISPLAY THE NAME OF (CHECK ONE):

Person submitting award Organization

Other (specify) _____

PLEASE CHECK HERE IF YOU **DO NOT WANT** YOUR ENTRY TO BE DISPLAYED AT THE AWARDS CEREMONY (Only winning entries to be displayed)

By signing below, I attest that all of the facts, figures and information contained within the entry are factual.

Signature

Date