

2009 AACIP AWARDS for Planning Excellence and Merit



ALBERTA  
Association

CANADIAN  
INSTITUTE OF  
PLANNERS

**Entry FORM Application**

**Title of Entry:** \_\_\_\_\_

**Category:** \_\_\_\_\_

**On behalf of:** \_\_\_\_\_  
*(community, company, organization, client)*

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Phone (bus)** \_\_\_\_\_ **(home)** \_\_\_\_\_

Name(s) Other individuals who should be credited in the event of an award	CIP Membership Category	Organization(s)

If selected for an award, by means of this signed form you agree to submit additional material and/or information. Please supply the name(s) and contact information for the following:

Materials/Information Required	Contact Name(s)	Telephone Numbers and E-mail Addresses
Three photos in electronic format that depict the project (if applicable)		
Short power point presentation (3 minute maximum)		
Short written presentation for a news release, etc.		
An electronic version of the logos of all organizations involved in the project		

**Entry prepared by or under the direction of:** \_\_\_\_\_

**Signature:** \_\_\_\_\_  
If different from the contact Person above,

**Phone No.** \_\_\_\_\_ **E-mail** \_\_\_\_\_