



# AWARDS 2017

## ENTRY FORM

Please fill in all categories digitally. Press releases, articles, magazine features, folio and the Awards Ceremony presentation will be written with the information provided below – be thorough and accurate.

### Entrant Information

Your Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Entrant Classification

Please check one of the following:

- |  |                                 |
|--|---------------------------------|
| <input type="checkbox"/> ASLA Fellow, Member, or Associate                       | ASLA Member #: _____            |
| <input type="checkbox"/> Non-Member Registered Landscape Architect               | State and Registration #: _____ |
| <input type="checkbox"/> Graduate of Landscape Architecture Degree Program       | School and Degree: _____        |
| <input type="checkbox"/> Faculty Member of Landscape Architecture Degree Program | School: _____                   |

### Entrant Category

Please select one of the following:

- I. General Design - Constructed Projects
- II. General Design - Unrealized Projects
- III. Residential Design
- IV. Burnham Awards for Planning and Analysis
- V. Communications
- VI. Landscape Architectural Research
- VII. Historic Landscapes
- VIII. General Design - Undergraduate Project
- IX. General Design - Graduate Project
- X. The Landmark Award\*
- XI. The Jensen Award\*

*Note: The Jurors have the right to change an entry to another category as they deem necessary.*

Award Recipient Name (if other than Entrant): \_\_\_\_\_

Project Name: \_\_\_\_\_

Year of Completion: \_\_\_\_\_ Project Location (if applicable): \_\_\_\_\_

Owner/Client(s): \_\_\_\_\_

Project Landscape Architect(s): \_\_\_\_\_

Landscape Architect(s) of Record: \_\_\_\_\_

Architect(s): \_\_\_\_\_

Engineer(s): \_\_\_\_\_

Contractor(s): \_\_\_\_\_

Other Consultant(s): \_\_\_\_\_

Parties involved in Prior Master Plan (if applicable): \_\_\_\_\_

*Note: The ILASLA is not responsible for verifying the information provided.*

### Photography Credit

- |          |           |           |
|----------|-----------|-----------|
| 1. _____ | 6. _____  | 11. _____ |
| 2. _____ | 7. _____  | 12. _____ |
| 3. _____ | 8. _____  | 13. _____ |
| 4. _____ | 9. _____  | 14. _____ |
| 5. _____ | 10. _____ | 15. _____ |

### Products used in the Built Project

Note: If project is selected as a winner, ILASLA will notify all parties listed below that their product was used in an award-winning project.

Product: \_\_\_\_\_ Brand: \_\_\_\_\_

Supplier Contact: \_\_\_\_\_

Product: \_\_\_\_\_ Brand: \_\_\_\_\_

Supplier Contact: \_\_\_\_\_

### Marketing Description

500 word maximum. To be used in folio and for future marketing publications. This will not be judged as part of the award submission.

# TERMS OF AGREEMENT

I have read the complete Call for Entries for the 2017 Illinois Chapter of the American Society of Landscape Architects (ILASLA) Awards Program and certify that this entry is in full compliance. I understand that all entries become the property of the ILASLA and will not be returned. Winning entries will be used by the ILASLA for public relations and traveling exhibit purposes.

I understand that, should I win, I will be responsible for the cost of publishing my winning project(s) in the annual ILASLA publication folio, which is distributed to peers in the Illinois marketplace. No publishing fee is required from Public Practice Award winners.

Projects may only be submitted by the copyright holder, whether an individual or firm. Individuals will not be recognized for projects done while under employment at a company or firm. In submitting this project designed by a company or firm, I acknowledge that I am acting on the firm's behalf and certify that I have written authorization from the firm to do so. In submitting this project as an individual I certify that I am the sole copyright owner or that I have obtained written permission from all interested parties to submit this project for award.

I take full responsibility for proper release of any photographs from their respective photographers so that they may be used for publication, and for the accuracy of the enclosed project information, holding harmless ILASLA.

I understand the ILASLA maintains the right to disqualify award program entrants or rescind awards at any time at the discretion of the Chapter Executive Committee.

Signature of Entrant: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed this entry to the 2017 ILASLA Awards Program and have no objections to the submission, judging, or publication of these materials.

Signature of Owner/Client(s): \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

## Requested Media Contacts

Please include up to three media contacts that you would like to receive press releases about your project should you win. Please include company name, personal contact (if any), phone, and email addresses.

1. \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_
2. \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_
3. \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_

All Entries must be received by **5:00 p.m. on Friday, December 8th, 2017**. All entrants will be notified of the results in early January.