

Name: _____

Date : _____ Competition: _____



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Date : _____ Competition: _____



PRINTED	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	1
	Title: _____		
	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	2
	Title: _____		
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	3	
Title: _____			
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	4	
Title: _____			
PROJECTED	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	1
	Title: _____		
	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	2
	Title: _____		
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	3	
Title: _____			
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	4	
Title: _____			

PRINTED	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	1
	Title: _____		
	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	2
	Title: _____		
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	3	
Title: _____			
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	4	
Title: _____			
PROJECTED	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	1
	Title: _____		
	Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	2
	Title: _____		
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	3	
Title: _____			
Award: <input type="checkbox"/> Merit <input type="checkbox"/> Credit <input type="checkbox"/> Acceptance <input type="checkbox"/> No award	_____	4	
Title: _____			

For the purposes of in-house competitions:

- EIGHT [8] PEGS = MERIT
- FIVE [5] PEGS = CREDIT
- TWO [2] PEGS = ACCEPTANCE

IMPORTANT NOTE:

It is the members responsibility to hand in this form to the Competition Manager at the end of the night of competition.

Please print clearly and fill in all fields

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