

# PICA Awards 2008 Entry Form



## Entry Information

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

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

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

City, state, zip \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_



## Printing Division

Indicate your number of employees below:

**Division A** Up to 9 employees

**Division B** 10 to 25 employees

**Division C** 26 to 50 employees

**Division D** 51 or more employees



## Entry Fee (First Two are FREE)

Total # of entries submitted: \_\_\_\_\_ Entry Fee: \$30 each (3 or more entries) \$ \_\_\_\_\_ (first 2 are FREE)

**Payment Options:** :  Check enclosed payable to PICA  Mastercard  VISA  AMEX

**Complete the attached form for Credit Card payment.**



## Category

Category Code: (Refer to Call for Entries **1A-37**) \_\_\_\_\_

Title of Piece: \_\_\_\_\_

Customer \_\_\_\_\_

Designer (optional) \_\_\_\_\_



## Submit Entry

Prepare Entry ID Tag below and tape securely to the **BACK** of the piece. Then place this form directly on top of your piece and ship with payment to:

**PICA AWARDS**  
**3601 Rose Lake Drive**  
**Charlotte, NC 28217**

After completing Entry ID Tag to the right, cut it out and tape securely to the back of the piece. For entries with multiple pieces, use an envelope or shrink wrap to keep all pieces together during shipment. DO NOT STAPLE OR PAPER-CLIP FORMS TO ENTRIES.

### QUESTIONS?

**Call (704) 357-1150**  
**or (800)-849-7422**  
**[www.picanet.org](http://www.picanet.org)**

## Entry ID Tag

Total Number of Pieces for this Entry \_\_\_\_\_

Title of Piece: \_\_\_\_\_

Category Code (i.e. 26-C): \_\_\_\_\_

**Press Size/# of Units:** (required) \_\_\_\_\_

Phone Number (required) \_\_\_\_\_

For Office Use Only



## Credit Card Authorization

PO Box 19889, Charlotte, NC 28219-0889  
(704) 357-1150 or (800) 849-7422 Fax: 704-357-1154

**Company:** \_\_\_\_\_

The Printing Industry of the Carolinas, Inc. also known as PICA is an affiliate of PIA/GATF representing the printing industry in North and South Carolina.

### Instructions:

Complete the form by including all billing information, along with signature of credit card holder. Completed form may be enclosed with your entries and shipped to 3601 Rose Lake Drive, Charlotte, NC 28217 – or you may fax the authorization form to **(704) 357-1154**.

I, \_\_\_\_\_ hereby authorize PICA to charge my credit card  
in the amount of \$ \_\_\_\_\_ (for PICA Award Entries).

### Type of Credit Card:

Mastercard  VISA  AMEX

**Credit Card #** \_\_\_\_\_

expiration date \_\_\_\_\_ CVC Code (three digits number on the back of the card) \_\_\_\_\_

### Credit Card Billing Address

Street/PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_

**For credit card processing of entry fees, complete & return this form with your entries –  
or fax to 704-357-1154**