

Payment Form

Please note: Only institutional members of AAM qualify for discounted entry fees. Individual members do not qualify for discounted fees.

Is your institution an institutional member of AAM? YES NO

YES: Your institutional membership number is: _____

Number of entries ____ x \$50 = _____

NO: Number of entries ____ x \$75 = _____

Name of Your Institution

Address

City/State/Zip

Telephone

E-mail

Contact Person

Check and Check Number _____

Credit card: (type) Visa MasterCard AmEx Expiration Date _____

Card number:

Name on card:

Send this payment form and your check—payable to **AAM Museum Publications Design Competition**—along with your entry, postmarked on or before March 15, 2010, to: 2010 AAM Museum Publications Design Competition, American Association of Museums, 1575 Eye St. N.W., Suite 400, Washington, DC 20005.

Visit www.aam-us.org/pubcomp for complete information.



Entry Form

You must supply budget information regardless of membership status.

My institution's annual operating budget is:

Less than \$750,000 \$750,000 or more **Category letter** ____ **Category name** _____

Title or Description of Your Entry

Name of Your Institution

Address

City/State/Zip

Telephone

E-mail

Person Submitting Entry

Name of Designer and/or Design Firm

Remove any protective wrapping from your entry. Use either staples or masking tape (**not paper clips**) to securely attach a completed entry form to the back of each entry.