



**Institute of
Packaging
Professionals**

AmeriStar 2009/2010 Package Competition

Official Entry Form

Print form to fill out. One entry per form. Photocopies of the Entry Form will be accepted. Please attach any additional pages (such as Narratives, etc.) to this form.

Submit Entry Application, Entry Fee, Supporting Materials, and Photocopies to:

**AmeriStar Package Competition
Institute of Packaging Professionals
1833 Centre Point Circle
Suite 123
Naperville, Illinois 60563**

ENTRY DEADLINE: January 22, 2010

Entrant's Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip _____

Phone: _____

Fax: _____

E-Mail: _____

Name of Package: _____

Category:

- | | | |
|--|--|--|
| <input type="checkbox"/> 1. Food | <input type="checkbox"/> 6. Outdoor & Gardening | <input type="checkbox"/> 11. Medical Device |
| <input type="checkbox"/> 2. Food, Institutional | <input type="checkbox"/> 7. Electronics | <input type="checkbox"/> 12. Regulated Packaging |
| <input type="checkbox"/> 3. Beverage | <input type="checkbox"/> 8. Displays | <input type="checkbox"/> 13. Industrial/Commercial |
| <input type="checkbox"/> 4. Health & Beauty Aids | <input type="checkbox"/> 9. Other Retail | <input type="checkbox"/> 14. Promotional |
| <input type="checkbox"/> 5. Household | <input type="checkbox"/> 10. Pharmaceutical/Drug | <input type="checkbox"/> 15. Other |

Have You Enclosed:

- AmeriStar Package Submission List
- Entry Fee

Payment (Check all that apply. Each additional entry cost represents 40% of first entry rate)

- loPP Member first entry..... \$684.00 ____
- loPP Member additional entry.....(# of additional entries) ____ X \$273.60 ____
- Non-Member first entry..... \$809.00 ____
- Non-Member additional entry.....(# of additional entries) ____ X \$323.60 ____

Total Amount Due ____

- I am an loPP Member and my company is an **loPP Corporate Sponsor**. I have deducted an additional 10% from the total registration fee..... ____
- I am an loPP Member and my company is an **loPP Corporate Benefactor**. I have deducted an additional 20% from the total registration fee..... ____

Total Amount Enclosed ____

- My check is enclosed (Note: Make checks payable to loPP)

All entry forms must be accompanied by appropriate entry fees, supporting documents, and photos. Any entry without any one of these components will be disqualified.

I hereby certify that the package entry I am submitting is my original work and that I am legally permitted to submit it, or that I am authorized to submit the entry by those who created it or own rights to it, and I agree to indemnify loPP and hold it harmless from any and all liability, claims, loss or damages, including attorney's fees, resulting from claims of third parties that this entry is an infringement of any intellectual property (trademark, trade dress, trade secret, copyright or patent) or of any contractual obligation. I further hereby certify that all information and claims made in connection with this entry are true and verifiable; that I will abide by all competition rules and regulations; that I understand that loPP, its agents or judges will not be responsible for improper display or return of an exhibit and that they assume no liability in connection with entries; and loPP has my permission to publish my entry in any manner it sees fit for promotional, educational or other purposes. I further understand that the sample of my package (and product, if included), my narrative description, and any of the photos or other requirements of entry that I submit, will not be returned to me following the competition.

Signature of Entrant: _____

For more information, visit www.iopp.org/ameristar