

ipb pride of place 2018

in association with Co-operation Ireland

Competition Entry Form

For completion by the Local Authority

	One Entry only per Form. Please use Block Capitals	Total number of entries including this one
	Nominating Local Authority	
	Address	
	Name of Liaison Officer	Department
	Telephone	Mobile
	Fax	Email
	Participating Community Group Name	
	Length of Time in Existence	
	Payee (in the event of winning a monetary prize)	
	Name for Certificates/Trophy Engraving	
	Area / Location Represented	

Category	Population	Tick ONE only	
1	0 - 300		
2	300 - 1,000		
3	1,000 -2,000		
4	4 2,000 - 5,000		
5	Over 5,000		
Category	Theme		
6 Creative Place Initiative			
7	Community Wellbeing Init	iative	
8	Community Tourism Initiative		
Category	Non Population		
9	Housing Estates		
10	Islands and Coastal Comm	unities	
11	Urban Neighbourhoods		

Invoice required Yes/No If Yes-advise P.O. Number and invoice address P.O. Invoice to:

Entry summary of 160 words is attached Yes/No

Please return completed entry and attachments to:

IPB Pride of Place, The Local Authorities Programme, Co-operation Ireland, Unit 1, The Court, Bridgefoot Street, Dublin D08 CC63

or

IPB Pride of Place, The Local Authorities Programme, Co-operation Ireland, Unit 5, Weavers Court Business Park, Linfield Road, Belfast BT12 5GH





