**ITPA Awards Acceptance Form**

Chapter/Club Name:

Club #:

Person completing form:

Daytime Phone:

E-Mail Address:

***Please print clearly.*** *If you choose to receive a check for charity – you MUST**include the correct EIN (tax identification number) for the charity, or your club will receive a plaque instead.*

**Award Choice** *(check one please)*

Award Plaque

Check for Charity

The ITPA award checks (1st place = $45, 2nd place = $35, 3rd place = $25) will be matched by the ITPA Charitable Foundation this year**.** Our congratulations to all the winning clubs!

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| **Project Information** | | **Name, Title and Phone Number of Person**  **Accepting Award**  **(e.g.: President, Project Chair, Member)** | |
| **Category:**  **Name of**  **Charity: Charity EIN:**  **Charity**  **Address:** |  | **Name: Title:**  **Daytime Phone:** |  |
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| **Category:**  **Name of**  **Charity: Charity EIN:**  **Charity**  **Address:** |  | **Name: Title:**  **Daytime Phone:** |  |
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| **Category:**  **Name of**  **Charity: Charity EIN:**  **Charity**  **Address:** |  | **Name: Title:**  **Daytime Phone:** |  |
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Please return this form as soon as possible.

**Forms must be received no later than Friday, March 28, 2025.**

ITPA

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Hinesville, GA 31313

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