**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

438 West Oglethorpe Hwy

 Hinesville, GA 31313

 itpa@telecom-pioneers.net