

Entering is easy...

Choose one Division

- **Community Organizations**
Local/State or National
(Nonprofit Groups, AAAs, Senior Centers, etc.)
- **Financial Services**
- **Government**
(Local, State, Federal)
- **Healthcare**
(Hospitals, Health Systems, Home Care, Managed Care)
- **Housing**
(Active Adult, Assisted Living, Long-Term Care)
- **Insurance**
- **Media**
Local/State or National
(Television, Radio, Publishing)
- **Miscellaneous Organization**
(Any organization not included in the above Divisions)

Choose one Category

Marketing & Communications:

(A single item)

- Brochure/Booklet
- Direct Mail
- Magazine Ad
- Newspaper Ad
- Radio Ad
- TV Ad
- Miscellaneous

(Total Programs)

- Special Event*
- Marketing/Advertising Campaign*
- Consumer/Public Relations Campaign*

Mature Work & Retirement:

(A single item)

- Brochure/Booklet
- Advertising—Print/Radio/TV
- CDs/DVDs*
- Miscellaneous

(Total Program)

- Retirement Education*

* Note: There is an additional \$20 fee for these categories.

Publications:

(A single item/issue)

- Annual Report
- Brochure/Booklet
- Calendar
- Magazine
- Miscellaneous Publication
- Newsletter
- Newspaper/Tabloid

Art/Design:

(A single item)

- Graphic Design
- Logo/Letterhead Design
- Photograph (must include older adult)

Editorial:

- Book*
- Single Article—Magazine/Newspaper/Newsletter
- Series of Articles—Magazine/Newspaper/Newsletter (same topic)*
- TV (single show/segment)
- Miscellaneous Editorial

Do you produce websites or other digital media?

Enter these in our New Product & Technology AwardsSM at www.agingawards.com

Submission Requirements

(Failure to follow these requirements may result in entry disqualification.)

1. Submit **one copy of your entry**. Enclose your entry in a 9" x 12" envelope (or larger if needed) with **two copies of your entry form** stapled (not taped) to the outside of the envelope. Place this in another envelope for mailing.
2. If you submit more than one entry: Place each entry in its own envelope with the two copies of each entry form stapled to the outside. You may send these entries together in one package.
3. Please do not mount any print materials. For editorial entries, *submit articles only*—not the entire publication. Photocopies are acceptable.

Questions? Call: 1-800-828-8225 • E-mail: info@seniorawards.com

2011 Entry Form

_____ (For office use)

Please type or neatly print all information below. Include **two copies of this form** with your entry. Place the entry in an envelope and staple the two copies of the entry form on the outside.

Name _____ Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Award Information: (List the **exact title** of your entry, not a generic term. The title and organization name you list below will be used on the certificate should you win an award.)

Entry Title _____
Actual name of the piece

Organization _____
If different than organization above

Division: (Check only one)

- Community Organizations
choose: Local/State or National
- Financial Services
- Government
- Healthcare

- Housing
- Insurance
- Media
choose: Local/State or National
- Miscellaneous Organization

Entry Deadline:
Postmarked by
March 31, 2011

Category: (Check only one)

Marketing & Communications: (A single item)

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- Direct Mail
- Magazine Ad
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(Total Programs)

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(A single item)

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Newspaper/Newsletter (same topic)*
- TV (single show/segment)
- Miscellaneous Editorial

* Additional \$20 fee required for these categories.

Payment Information:

Entry Fee: \$52.00 per entry. (\$20 additional fee for categories marked with an asterisk*)
Make checks payable to: **Mature Market Resource Center (MMRC)**,
or use VISA/MasterCard/American Express. Our Federal Tax ID Number: 36-3559293.

Mail To: **2011 National Mature Media Awards • c/o Mature Market Resource Center**
1850 W. Winchester Road, Suite 213
Libertyville, IL 60048-5355

Entry Fee \$ 52.00 + Add'l Fee* (if applicable) _____ **TOTAL \$** _____

Method of Payment: Check VISA MasterCard American Express

Card Number _____ Expiration Date _____

Cardholder Name (please print) _____ Signature _____