

IBC Bulletin Contest Entry Form

Name of Editor: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Name of Publication: _____

Chapter: _____

Publication Schedule (Monthly, Bi-Monthly, Weekly, Bi-Weekly): _____

Entries

Issue #1 (Month): _____

Issue #2 (Month): _____

I certify that I published at least six online bulletins during the contest (calendar) year and that I am a member of PROBE for the year being judged and the year judging takes place.

My PROBE member number is: (# _____)

Signature

Mail to IBC Chair: Lowell Shank

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Sun Lakes, AZ 85248

Email address: Lowell.shank@wku.edu

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