

CATEGORIES

1 SELECT ONE

1. Advertising Specialty Items
2. Annual Report
3. Billboard Design
 - 3a. Single Entry
 - 3b. Series (3+ pieces)
4. Blogs
5. Brochure Advertising
 - 5a. Single Entry
 - 5b. Series (3+ pieces)
6. Calendar
7. Crisis Management (Covid-19, etc)
 - 7a. Single Entry
 - 7b. Series (3+ pieces)
8. Direct Mail Piece
 - 8a. Single Entry
 - 8b. Series (3+ pieces)
9. E-newsletter
 - 9a. Single Entry
 - 9b. Series (3+ pieces)
10. Flyer
 - 10a. Single Entry
 - 10b. Series (3+ pieces)
11. Invitations
12. Logo/Letterhead
13. Magazine Ad Design
 - 13a. Single Entry
 - 13b. Series (3+ pieces)
14. Magazine Publication
 - 14a. Single Entry
 - 14b. Series (3+ pieces)
15. Mobile Apps
16. Newsletter
 - 16a. Single Entry
 - 16b. Series (3+ pieces)
17. Newspaper Advertising
 - 17a. Single Entry
 - 17b. Series (3+ pieces)
18. Outdoor Transit
 - 18a. Single Entry
 - 18b. Series (3+ pieces)
19. Patient Education
 - 19a. Single Entry
 - 19b. Series (3+ pieces)
20. Patient Handbook
21. Physician Referral
 - 21a. Single Entry
 - 21b. Series (3+ pieces)
22. Pocket Folder
23. Poster/Displays
 - 23a. Single Entry
 - 23b. Series (3+ pieces)
24. Publication
 - 24a. Single Entry
 - 24b. Series (3+ pieces)
25. Radio Advertising
 - 25a. Single Entry
 - 25b. Series (3+ pieces)
26. Social Media
 - 26a. Single Entry
 - 26b. Series (3+ pieces)
27. Special Event (Series)
28. Special Video Advertising
 - 28a. Single Entry
 - 28b. Series (3+ pieces)
29. Telemedicine
 - 29a. Single Entry
 - 29b. Series (3+ pieces)
30. Total Advertising Campaigns
31. TV/Video Advertising
 - 31a. Single Entry
 - 31b. Series (3+ pieces)
32. Website (URL address)
33. Website Banner Ads
 - 33a. Single Entry
 - 33b. Series (3+ pieces)
34. Other/Miscellaneous Material

CardioVascular

ADVERTISING AWARDS

2021 ENTRY FORM

ENTRY NUMBER

For Internal Use Only

- PLEASE COMPLETE ALL EIGHT STEPS!
- Type or print all information clearly.
- Photocopies are allowed. There is no limit of entries

- Enclose two copies of the Entry Form per entry-- One with actual entry and one with payment. One check is acceptable for all entries.

2 Name Of Entry: _____

3 Organization: _____

Contact: _____

Title: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone (Include Area Code): _____

E-mail: (winners will be notified first by e-mail) _____

4 Advertising Agency: _____

Contact: _____

Title: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone (Include Area Code): _____

E-mail: (winners will be notified first by e-mail) _____

5 GROUP (Entry was designed for what type of organization): CHECK ONLY ONE

- | | | |
|--|---|---|
| <input type="checkbox"/> Academic Medical Center | <input type="checkbox"/> Hospital 300 - 499 beds | <input type="checkbox"/> Medical Devices/Equipment Co. |
| <input type="checkbox"/> Children's Hospital | <input type="checkbox"/> Hospital over 500 beds | <input type="checkbox"/> Medical Practice/Physician Group |
| <input type="checkbox"/> Foundation/Fundraising | <input type="checkbox"/> Healthcare System | <input type="checkbox"/> Non-Hospital Organization/Assoc. |
| <input type="checkbox"/> Hospital under 149 beds | <input type="checkbox"/> Heart Hospital/Vascular Hospital | <input type="checkbox"/> Pharmaceutical Industry |
| <input type="checkbox"/> Hospital 150 - 299 beds | <input type="checkbox"/> Managed Care/Insurance | <input type="checkbox"/> Other _____ |

6 AWARDS (If entries win, send awards to): CHECK ONLY ONE

- ORGANIZATION ADVERTISING AGENCY

7 HOW DID YOU HEAR ABOUT THIS PROGRAM? CHECK ALL THAT APPLY

- Direct Mail E-mail I Entered Previously Search Engine Social Media Other

8 PAYMENT OF ENTRY FEES (Total all entries and select form of payment)

Form of Payment:

- Check Enclosed
- Payment Sent Under Separate Cover
- Credit Card (provide credit card information in section to the right.)

Single Entries x \$75 each	\$ _____
Total Ad Campaigns x \$100 each	\$ _____
Series Entries x \$100 each	\$ _____
One Time Late Fee	\$ 25.00
(If Entries Are Postmarked After October 15, 2021)	
TOTAL ENTRY FEES	\$ _____

SEND ENTRIES TO:
Creative Images, Inc.
"CardioVascular Advertising Awards"
627 Nautilus Drive
Murrells Inlet, SC 29576

(Select Type Of Credit Card)   

CC#: _____

Name on Card: _____

Expiration Date: _____ Security Code (on back): _____