

IBC Bulletin Contest Entry Form

Name of Editor: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Name of Publication: _____

Chapter: _____ District: _____

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

Entries

Issue #1 (Month): _____

Entry #2 (Month): _____

I certify that I published at least six bulletins during the contest (calendar) year
and am a member of PROBE for the year being judged and the year judging take place.
My PROBE member number is:

Signature

Mail to IBC Chair: Lowell Shank

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Address: Bowling Green, KY 42101

Email Address: Lowell.shank@wku.edu

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