

THIS FORM MUST BE COMPLETED, SIGNED AND SENT WITH EACH SUBMISSION

THIS I ONIVINOST BE CONFELTED, SIGNED AND SENT WITH EACH SUBMISSION
1. CONTACT DETAILS
FULL NAME OF INDIVIDUAL:
BUSINESS/PRACTICE NAME:
ADDRESS:
PHONE: ()
MOBILE:
EMAIL:
WEBSITE:
2. ELIGIBILITY* (refer to terms and conditions for eligibility) SELECT DESIGN DISCIPLINE: Architect Interior Decorator Interior Designer Interior Product Designer Textile Designer Interior Stylist Other(please specify):
3. ENTRY (Maximum of three designs can be submitted) TO SUPPORT YOUR ENTRY PLEASE INCLUDE 100 WORDS ON EACH DESIGN TO DESCRIBE THE CONCEPT/DESIGN: (i) Name of design:
Description:
(ii) Name of design:
Description:
(iii) Name of design:
Description:
DECLARATION 1. I certify that I am the author of the designs submitted and the concept(s) are original. 2. I certify that all information contained within this entry is true and correct. 3. I authorise Designer Rugs and its partners to reproduce works submitted for publication as part of the Evolve Awards program, on the Designer Rugs website and Award event, and all associated promotional activities and publicity, without limitation. 4. I confirm that I have read the terms and conditions as detailed and acknowledge that they may be updated and amended by Designer Rugs during the course of this competition and that it is my responsibility to remain up to date with the terms. I THEREBY AGREE TO THE TERMS AND CONDITIONS OUTLINED ABOVE. SIGNATURE:
PRINT NAME: DATE / /