This document is intended to provide authorization for the following SWR Institute members:

[128x738]SWR Institute Award of Excellence Program
AUTHORIZATION FORM

[128x738]This document is intended to provide authorization for the following SWR Institute members: ________________________________________________________________

______________________________________________________________

[18x675]AUTHORIZATION FORM

[18x675]This document is intended to provide authorization for the following SWR Institute members: ________________________________________________________________

______________________________________________________________

The Program requires the SWR Institute members identified above to obtain signed authorizations from all necessary parties to allow the members to submit Project documents and to otherwise consent to the submission of the Project for consideration under the Program.

The undersigned further agree that the Project documents submitted for the Program:

• Will be copied and submitted to SWR Institute for consideration under the Program;
• May be displayed at SWR Institute conventions;
• Can be reprinted in whole or in part in any form of media by SWR Institute for the purposes of illustrating the project;
• Will not be returned and will ultimately be destroyed/recycled.

The undersigned agree that they are authorized to allow the SWR Institute members to submit Project documents to SWR Institute under the Program and the undersigned further agree to abide by the terms of the Program.

Owner Name (Please Print) __________________________________________
Name of Person Signing ____________________________________________
Signature ____________________________________________ Date

General Contractor Name (Please Print) ______________________________
Name of Person Signing ____________________________________________
Signature ____________________________________________ Date

Contractor Name (Please Print) ______________________________________
Name of Person Signing ____________________________________________
Signature ____________________________________________ Date

Manufacturer Name (Please Print) __________________________________
Name of Person Signing ____________________________________________
Signature ____________________________________________ Date

Associate Name (Please Print) ______________________________________
Name of Person Signing ____________________________________________
Signature ____________________________________________ Date