



PLEASE PRINT

**Bike Rack Design Contest
ENTRY FORM**

CONTACT INFORMATION (Please list all participant names and information for a primary contact)

SECTION 1

Name of Design*:

Participant Name(s)*:

Address:

City/Town*:

Telephone (Home): _____

(Mobile): _____

(Work): _____

Email*:

*Necessary for complete entry.

MANDATORY INFORMATION

SECTION 2

The following required information has been included with this submission:

Completed Entry Form

Concept Design - Including

- an illustration of the bike rack design showing general dimensions
- a short description of the design inspiration

Resume/Personal Bio (Max 1 page per participant) – Please tell us about yourself, your background, your relationship with cycling, or any other information you feel is relevant.

DECLARATION

SECTION 3

I certify that I am eligible to enter this contest, have ownership of the submitted design, and am able to enter into a license agreement. By entering this contest, I accept the conditions of the contest [Terms of Reference](#) and the decision of the Bike Rack Design Contest Evaluation Panel. I hereby permit the City of St. John's to publicly display the submitted design and agree to enter into a license agreement with the City to allow the City to use, modify, manufacture, reproduce, and install the design.

Signature of Participant(s): _____

Date (yyyy/mm/dd): _____
Date (yyyy/mm/dd): _____
Date (yyyy/mm/dd): _____

Signature of Parent/Guardian (if participant is under the age of 19 years old): _____

Date (yyyy/mm/dd): _____

IMPORTANT INFORMATION

Entries must be submitted no later than **4:00 PM** on **September 7, 2018**.

Ensure that you have completed all sections of the entry form and included all mandatory information. Incomplete applications will be considered ineligible.

Please submit completed form **VIA EMAIL** to:

transportation@stjohns.ca

Subject: Bike Rack Design Contest

For more information:

Call 311 or (709) 754-CITY (2489)