



The Endeavour Award
 (503) 239-7641
 Web: www.osfci.org/endeavour



Entry Form

Fill in and print the form and mail with five copies of each submission to the address below:

WE MUST HAVE FULL CONTACT INFORMATION FOR THE AUTHOR AND PUBLISHER.

We understand the need to protect the privacy of authors, and only use the information for the administration of the Award and to ensure that all finalists are invited to the Award Ceremony. If you need to obtain an author's permission before sending us their information, please do so.

Date of Entry: **Month:** _____ **Year:** _____

Title of Book: _____

Publication Date: **Month:** _____ **Year:** _____

Author (s): _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

* If not author, are you an: **Agent:** _____ **Editor/Publisher, Etc:** _____ **Reader:** _____

Publisher: _____

Contact: Name/Title: _____ / _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

Print the form and mail it with five copies of each submission to the Award Chairman at:

Endeavour Award
 c/o James Fiscus
 1915 SE Taylor
 Portland, Oregon 97214 Email: Endeavour@osfci.org