

2024



THE AMERICAN ARCHITECTURE AWARDS

THE CHICAGO ATHENAEUM: MUSEUM OF ARCHITECTURE AND DESIGN AND THE EUROPEAN CENTRE FOR ARCHITECTURE ART DESIGN AND URBAN STUDIES

The Jury will base their decisions on the projects to be exhibited and awards by the contents of your submission. ALL information on this form should be complete and accurate (including the official firm names in full and all information should be completed IN FULL)

NAME OF PROJECT: _____

PROJECT TYPE: _____ CITY/COUNTRY: _____ DESIGN/BUILT DATE: _____

IS THE PROJECT: UNDER CONSTRUCTION? COMPLETED? AN UNBUILT PROJECT?

Architect:

Firm Name: _____

Address: _____

City: _____ State: _____

Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Contact Person: _____

Contact Email: _____

Please check all information is absolutely correct and accurate

Associate Architect:

Firm Name: _____

Address: _____

City: _____ State: _____

Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Contact Person: _____

Contact Email: _____

Please check all information is absolutely correct and accurate

Client

Firm Name: _____

Address: _____

City: _____ State: _____

Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Contact Person: _____

Contact Email: _____

Please check all information is absolutely correct and accurate. Client information MUST be given, if confidential please fill out all sections and tick the confidential box below

CLIENT WISHES THIS INFORMATION NOT TO BE PUBLISHED

Contractor

Firm Name: _____

Address: _____

City: _____ State: _____

Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Contact Person: _____

Contact Email: _____

Please check all information is absolutely correct and accurate

IMPORTANT: On a separate sheet, provide same information for subcontractors, engineers, and consultants with firm names, addresses, telephone and fax numbers. All information must be complete. Attach to this sheet.

VISA/MASTERCARD/AMEX _____ EXPIRATION DATE _____ CCV NUMBER _____ SIGNATURE _____

NAME OF CARDHOLDER _____ Address of Card Holder _____

WIRE TRANSMISSION: Contact The Chicago Athenaeum for Instructions : jennifer@chicagoathenaeum.org

CHECKLIST

____ Fully Completed Application Form. _____ CD-ROM with up to eight (8) photographs in high quality jpg/tiff formats ONLY. _____

Entry Fee \$395.00 USD per project submitted. _____ Include Site Plans, Floor Plans, Sections, Elevations in one.pdf file

____ One-page Project Description in MicroSoft Word or PDF formats.

Send Application and Materials to:

The Chicago Athenaeum, 601 South Prospect Street, Galena, Illinois 61036, USA. Attn: The American Architecture

Awards **DEADLINE: MATERIALS MUST BE DELIVERED OR POSTMARKED BY FEBRUARY 1, 2024.**

* Selections will not be reviewed if all of the requested items on the checklist are not included.

** Submissions are not returnable. For more than one (1) project, submit a separate photocopied application form with each submission.