

CALL FOR ENTRIES

RECOGNIZING EXCELLENCE IN MEDICAL MARKETING • DEADLINE: FEBRUARY 29, 2016

INSTRUCTIONS

1. ELIGIBILITY: All marketing/advertising materials developed, produced and/or distributed during the calendar year 2015 are eligible for entry.

2. ENTRY FORMS: Enclose **two** copies of the Entry Form per entry. One form with actual entry and one with payment. There is no limit on the number of entries that may be submitted.

3. DEADLINE **FEBRUARY 29, 2016**
LATE DEADLINE **APRIL 1, 2016**

Entries must be postmarked on or by these dates. Late entries (postmarked after February 29, 2016) must include a one time \$25 late fee. No entries postmarked after April 1, 2016, will be accepted.

4. PAYMENT: Enclose **one check** for the total amount of all entries with a copy of the Entry Form.

SINGLE ENTRIES\$45.00/each
SERIES ENTRIES.....\$70.00/each
TOTAL AD CAMPAIGNS\$70.00/each

Make checks payable to: Creative Images, Inc.
Visa, Mastercard and AMEX are also accepted.
(See Entry Form)

5. Ship all entries to:
CREATIVE IMAGES, INC.
"ASTER AWARDS COMPETITION"
141 WILLETS ROAD
SYLVA, NC 28779



6. ENTRIES: Entries will not be returned. Aster Award entrants agree that all entries may be reprinted non-exclusively in Award Annuals, *Marketing Healthcare Today* magazine, and other promotional materials affiliated with Creative Images, Inc. Entrants hold or will secure the necessary licenses for use of all creative content embodied in any of the entries.

SUBMISSION REQUIREMENTS

- **MOBILE & APPS:** Mobile website/app entries must be accessible via iTunes or placed on media with appropriate download instructions. They will be judged on a mobile device.
- **MOUNTED ITEMS:** Mount all one-sided materials... newspaper ads, magazine ads, posters, billboards, outdoor transit, logos, letterhead, etc., on a display board with the Entry Form attached to the back of the board. Photos of billboards or outdoor transit are acceptable. No specific size requirements in mounting. **PDF Files are accepted.**
- **PRINTED MATERIALS:** For multiple-sided entries, (brochures, annual reports, direct mail, magazines, handbooks, etc.) place the entry in an envelope or box along with the Entry Form. **PDF Files are accepted.**

- **RADIO SPOTS:** Submit CD's in an envelope with an Entry Form attached. Can be submitted online as well.

- **SOCIAL MEDIA:** Entries may be submitted as a link, pdf or print.

- **VIDEO/TV:** Submit television and special video productions on DVD. Video entries should be submitted in an envelope with an Entry Form attached. Can be submitted online as well.

- **SERIES/CAMPAIGNS:** Submit series entries and total advertising campaigns in a large envelope or box. Make sure an Entry Form is attached securely to outside of envelope or box. All media including TV & Radio should be included for campaigns. **PDF Files are accepted.**

- **WEBSITE:** Write the URL as the Name of Entry (See #1 on the Entry Form).

ONLINE SUBMISSIONS:

Submissions are now accepted online via dropbox or hightail. The email that you need to share them with is **mlucas@asterawards.com**. You can send multiple entries that way as long as you separate them into folders and include a scanned copy of the entry form in each folder. **Include a master copy of the entry form with the total number of submissions and payment information.** Once your entries are downloaded, we will send you a confirmation email. **If you do not receive a confirmation then we did not receive your entries!!**

AWARDS

Entries will be judged on: Creativity, Layout/Design, Typography, Production, Knowledge Transfer & Overall Quality. Professional, Full-Color Gold, Silver, and Bronze awards will be issued by both Group and Category. Judge's Choice trophies will be presented to Division winners receiving a perfect score. An overall Best of Show will be awarded to the top entry in the competition.

Winners will be announced in *Marketing Healthcare Today*, as well as posted on the Aster Awards' website, **www.AsterAwards.com**. **All awards will be sent to the organization designated on the Entry Form (#6).** **Duplicate awards may be purchased after issued.**

Selected winners, as well as Judge's Choice recipients, will be recognized in the 2016 Aster Awards Annual, Television Advertising DVD and/or the Radio Advertising CD. Entries chosen to be featured will be at the discretion of the Aster Awards staff.

If you have any questions regarding the Aster Awards, visit us online (www.AsterAwards.com), or call toll free 1-800-254-6789 ext. 102.

CATEGORIES

1 SELECT ONE

1. Advertising Specialty
(Hats, Shirts, Pens, Cups, Mouse Pads, etc)
2. Annual Report
3. Billboard Design
 - 3a. Single Entry
 - 3b. Series (3+ pieces)
4. Blogs
5. Brochure Advertising
 - 5a. Folded / Panels
 - 5b. Multiple Pages
 - 5c. Series (3+ pieces)
6. Calendar
7. Direct Mail Piece
 - 7a. Single Entry
 - 7b. Series (3+ pieces)
8. E-Newsletter
 - 8a. Single Entry
 - 8b. Series (3+ pieces)
9. Flyer
 - 9a. Single Entry
 - 9b. Series (3+ pieces)
10. Internal Campaign (Series)
11. Invitations
12. Logo Design/Letterhead
13. Magazine Ad Design
 - 13a. Single Entry
 - 13b. Series (3+ pieces)
14. Magazine Publication
 - 14a. Single Entry
 - 14b. Series (3+ pieces)
15. Mobile Apps
16. Multilingual Advertising
 - 16a. Single Entry
 - 16b. Series (3+ pieces)
17. Newsletter/Internal
 - 17a. Single Entry
 - 17b. Series (3+ pieces)
18. Newsletter/External
 - 18a. Single Entry
 - 18b. Series (3+ pieces)
19. Newspaper Advertising
 - 19a. Single Entry
 - 19b. Special Tabloid
 - 19c. Insertion Piece
 - 19d. Series (3+ pieces)
20. Outdoor Transit
 - 20a. Single Entry
 - 20b. Series (3+ pieces)
21. Patient Education
 - 21a. Single Entry
 - 21b. Series (3+ pieces)
22. Patient Handbook
23. Pharmaceutical Education
 - 23a. Single Entry
 - 23b. Series (3+ pieces)
24. Photo/Illustration
 - 24a. Single Entry
 - 24b. Series (3+ pieces)
25. Physician Directory
26. Physician Referral Program
 - 26a. Single Entry
 - 26b. Series (3+ pieces)
27. Pocket Folder
28. Poster/Displays
 - 28a. Single Entry
 - 28b. Series (3+ pieces)
29. Professional Recruitment
 - 29a. Single Entry
 - 29b. Series (3+ pieces)
30. Publication/Internal
 - 30a. Single Entry
 - 30b. Series (3+ pieces)
31. Publication/External
 - 31a. Single Entry
 - 31b. Series (3+ pieces)
32. Radio Advertising
 - 32a. Single Entry
 - 32b. Series (3+ pieces)
33. Self Promotion
 - 33a. Single Entry
 - 33b. Series (3+ pieces)
34. Service Line Promotions (All Are Series)
 - 34a. Bariatric Services
 - 34b. Behavioral Health
 - 34c. Cancer Services
 - 34d. Cardiac/Vascular Svcs.
 - 34e. Children's Services
 - 34f. Emergency Services
 - 34g. Home Health & Hospice
 - 34h. Orthopedic Services
 - 34i. Physician Relations
 - 34j. Rehab Services
 - 34k. Senior Services
 - 34l. Surgical Services
 - 34m. Women's Services
 - 34n. Other/Misc.
35. Social Media
 - 35a. Single Entry
 - 35b. Series (3+ pieces)
36. Special Events (Series)
37. Special Video Production
 - 37a. Single Entry
 - 37b. Series (3+ pieces)
38. Total Advertising Campaigns
(Includes 3+ pieces)
39. TV/Video Advertising
 - 39a. Single Entry
 - 39b. Series (3+ pieces)
40. Virtual Tours
41. Website Design (URL address)
42. Website Advertising (Banners, Etc)
43. Other/Miscellaneous Material:
(Special Promotional Materials)

IF YOU HAVE ANY QUESTIONS, CALL (800) 254-6789 EXT. 102.

- **PLEASE COMPLETE ALL (8) STEPS!**
- Type or print all information clearly.
- Photocopies are allowed. There is no limit of entries.
- Enclose **two** copies of the entry form per entry - one with actual entry and one with payment. One check is acceptable for all entries.

2 Name Of Entry: _____

3 Institution: _____

Contact: _____

Title: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone (Include Area Code): _____

E-mail: (winners will be notified first by e-mail) _____

4 Advertising Agency: _____

Contact: _____

Title: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone (Include Area Code): _____

E-mail: (winners will be notified first by e-mail) _____

5 Group - Entry Designed For (Check One):

- | | | |
|--|--|---|
| <input type="checkbox"/> Academic Medical Center | <input type="checkbox"/> Hospital 150 - 299 beds | <input type="checkbox"/> Long Term Care Facility |
| <input type="checkbox"/> Children's Hospital | <input type="checkbox"/> Hospital 300 - 499 beds | <input type="checkbox"/> Medical Devices/Equipment Co. |
| <input type="checkbox"/> Foundation/Fundraising | <input type="checkbox"/> Hospital over 500 beds | <input type="checkbox"/> Medical Practice/Physician Group |
| <input type="checkbox"/> Government Agency | <input type="checkbox"/> Healthcare System | <input type="checkbox"/> Non-Hospital Organization/Assoc. |
| <input type="checkbox"/> Healthcare Advertising Agency | <input type="checkbox"/> Healthcare Education | <input type="checkbox"/> Pharmaceutical Industry |
| <input type="checkbox"/> Hospital under 75 beds | <input type="checkbox"/> Managed Care/Insurance | <input type="checkbox"/> Specialty Care Facility |
| <input type="checkbox"/> Hospital 76 - 149 beds | <input type="checkbox"/> Home Health/Hospice | <input type="checkbox"/> Other _____ |

6 Awards (If You Win) Should Be Sent To (Check One Only - Duplicates May Be Ordered):

- Healthcare Organization Advertising Agency

7 How Did You Hear About The Aster Awards Program?

- | | | |
|---|---|--|
| <input type="checkbox"/> Direct Mail | <input type="checkbox"/> E-mail Promotion | <input type="checkbox"/> Search Engine |
| <input type="checkbox"/> I Entered Previously | <input type="checkbox"/> Social Media | <input type="checkbox"/> Other _____ |

8 Payment (Select Type of Payment & Calculate Total Entries and Fees)

Form of Payment:

- CHECK ENCLOSED WITH ENTRY
- SENT SEPARATELY
- CREDIT CARD (PROVIDE CREDIT CARD INFORMATION IN SECTION TO THE RIGHT.)

Single Entries x \$45/each	\$ _____
Total Ad Campaigns x \$70/each	\$ _____
Series Entries x \$70/each	\$ _____
One Time Late Fee	\$ 25.00
(If Entries Are Postmarked After Feb. 29, 2016)	
TOTAL (U.S. Funds Only)	\$ _____

SEND ENTRIES TO:
ASTER AWARDS
141 WILLETS ROAD
SYLVA, NC 28779

CREDIT CARD INFORMATION



CC#: _____

Name on Card: _____

Expiration Date: _____ Security-Code (3 or 4 digit): _____

Zip Code: _____

FEEL FREE TO CONTACT US TOLL FREE AT 800-254-6789 EXT 102 • EMAIL: INFO@ASTERAWARDS.COM