



ENTRY FORM for Category A/B

THE 14TH INTERNATIONAL POSTER TRIENNIAL IN TOYAMA, 2024

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The information provided on your entry form will be used for works selected to appear in the IPT2024 catalogue. As a rule, we do not accept changes to this information, so please enter it carefully.

Family Name	Gender <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> other <input type="checkbox"/> prefer not to say	Date of birth	Nationality
First Name(s)			
Address			TEL:
			FAX:
			E-mail :

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No.	Title of Poster	Year of production	Size (cm)	Printing method	Name of publisher/client
A	Title of poster	Year of production	× cm	<input type="checkbox"/> Offset <input type="checkbox"/> Silkscreen <input type="checkbox"/> Inkjet Other:	<input type="checkbox"/> Name of publisher/client: <input type="checkbox"/> Original self-produced poster
	English translation	Poster genre (Please select the appropriate genre for your poster submission from the options listed at the bottom of this form) : No. _____			
	Title of poster	Year of production	× cm	<input type="checkbox"/> Offset <input type="checkbox"/> Silkscreen <input type="checkbox"/> Inkjet Other:	<input type="checkbox"/> Name of publisher/client: <input type="checkbox"/> Original self-produced poster
English translation	Poster genre (Please select the appropriate genre for your poster submission from the options listed at the bottom of this form) : No. _____				
3	Title of poster	Year of production	× cm	<input type="checkbox"/> Offset <input type="checkbox"/> Silkscreen <input type="checkbox"/> Inkjet Other:	<input type="checkbox"/> Name of publisher/client: <input type="checkbox"/> Original self-produced poster
	English translation	Poster genre (Please select the appropriate genre for your poster submission from the options listed at the bottom of this form) : No. _____			

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B	Title of poster	Year of production	× cm	<input type="checkbox"/> Offset <input type="checkbox"/> Silkscreen <input type="checkbox"/> Inkjet Other:	Please confirm that your submission conforms to the following requirements: <input type="checkbox"/> My poster contains the word "Think()" <input type="checkbox"/> My poster contains the credit line "IPT2024"
	English translation	Category B theme: Think() Poster genre (Please select the appropriate genre for your poster submission from the options listed at the bottom of this form): No. _____			
2	Title of poster	Year of production	× cm	<input type="checkbox"/> Offset <input type="checkbox"/> Silkscreen <input type="checkbox"/> Inkjet Other:	Please confirm that your submission conforms to the following requirements: <input type="checkbox"/> My poster contains the word "Think()" <input type="checkbox"/> My poster contains the credit line "IPT2024"
	English translation	Category B theme: Think() Poster genre (Please select the appropriate genre for your poster submission from the options listed at the bottom of this form): No. _____			


Poster Genres: [CULTURAL: 1. Exhibition 2. Theater or drama 3. Concert or music 4. Other]
 [PUBLIC or SOCIAL: 5. Environment or ecology 6. Human rights 7. Other]
 [8. COMMERCIAL][9. OTHER]





Poster Label for Category A/B


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The poster label should be pasted at the top right-hand corner on the reverse side of the poster.
The number of each poster should correspond with the number on the entry form.

 Category A		No. 1	
		Art Director	
Name of applicant		Designer	
Poster title		Illustrator	
		Photographer	
Year of production	Nationality of applicant	Client	


 Category A		No. 2	
		Art Director	
Name of applicant		Designer	
Poster title		Illustrator	
		Photographer	
Year of production	Nationality of applicant	Client	

 Category A		No. 3	
		Art Director	
Name of applicant		Designer	
Poster title		Illustrator	
		Photographer	
Year of production	Nationality of applicant	Client	

 Category B		No. 1	
		Art Director	
Name of applicant		Designer	
Poster title		Illustrator	
		Photographer	
Year of production	Nationality of applicant		

 Category B		No. 2	
		Art Director	
Name of applicant		Designer	
Poster title		Illustrator	
		Photographer	
Year of production	Nationality of applicant		

↓ Please attach this mailing label to your package

From:	To: IPT2024  Toyama Prefectural Museum of Art and Design 3-20 Kiba-machi, Toyama-city 930-0806 JAPAN Tel: (+81)76-431-2711 Fax: (+81)76-431-2712
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