

## GARDEN STATE DIVISION PAUL MALLERY TROPHY ENTRY FORM

Member's Name:	NMRA #:	Exp:
Street:		
City:	State:	ZIP:
Home Phone:	Work Phone:	
Cell Phone:	E-Mail:	
	Model to be Considered	
Model Name:		
	ucted: Percentage Completed	
Brief Description (Include Photos):_		
Points Scored in Model Contest or A	chievement Program Judging:	
Venue of Judging: Model Conte		
venue of Judging.	Achievement Program	
	Use Addendum to Submit Additional Models	
Signature:		Date: