**RHS It’s Your Neighbourhood (IYN) Entry Form 2024**

**For Admin Only**

Group:

Entry:

Key Contact:

Area:

Co-ordinator:

Paid:

Status:

**Please note**:

A unique contact is required for each group that enters.

**Name of Entry………………………………………………………………………………………………**

***This is the name that will appear on any award/certificate you may receive.***

**Post Code of Entry (for location of the site)** *………………………………………….*

**Contact Name**………………………………………………. **Position**…………………………………………………………

**Address**………………………………………………………………………………………………………………………………………

**Post Code**…………………… **Tel No**……………………………............... **Mobile**……………………………………

**E-mail**…………………………………………………………………….………………………

**RHS IT’S YOUR NEIGHBOURHOOD AWARDS**

Please indicate the category in which you wish to be assessed

|  |  |  |
| --- | --- | --- |
| **Category** | **Charge** | **Please Tick** |
| Neighbourhood | No Fee |  |
| Hospice / Residential Home | No Fee |  |
| Railway Station | No Fee |  |

Please return (preferably by e-mail) by **31st March** **2024** to:

Regional Organiser,

Britain in Bloom North West,

Rural Business Centre, Myerscough College,

Bilsborrow, Preston, Lancashire PR3 0RY

**Tel:** 01995 642101

**E-mail:** [info@northwestinbloom.com](mailto:info@northwestinbloom.com)