

# Photography Competition Entry Form

(Please print clearly)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phones (Day) \_\_\_\_\_ (Eve) \_\_\_\_\_

Email: \_\_\_\_\_

Category:  Color Print  Black & White Prints  Digital Prints

Enclosed: ..... \$\_\_\_\_\_ for \_\_\_\_\_ # prints

**\*Make Entry Fee (check or money order) payable to L.G. & Associates**

Photo Title #1 \_\_\_\_\_

Photo Title #2 \_\_\_\_\_

Photo Title #3 \_\_\_\_\_

I grant permission to Young At Art Children's Museum to show my prints for exhibitions, publications and promotional purposes.

Signature \_\_\_\_\_

Date \_\_\_\_\_

(Please affix a copy of this form to the back of each print being submitted.)

**A portion of the proceeds benefit Young At Art Children's Museum.**