

ENTRY FORM

FRIENDS OF POOL 9 PHOTO CONTEST

Each entry must have this form attached to the back of the photo.

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: (Day) _____ EVENING: _____

E-MAIL ADDRESS: _____

PHOTO TITLE: _____

PHOTO CATEGORIES:

Scenic Views: _____

Recreation: _____

Small Wonders: _____

I AM: _____ AMATEUR PHOTOGRAPHER. _____ MEMBER OF THE FRIENDS OF POOL 9

_____ I WISH TO DONATE MY PHOTO TO THE FRIENDS OF POOL 9

By signing this form I hereby grant the Friends of Pool 9 and our affiliates the following irrevocable rights: to use and reuse my name and photographic likeness in all form and media to publish and republish the Photograph in whole or in part, individually or in conjunction with print manner or in composite form and in any medium for editorial commercial promotion. I hereby waive any right to inspect or approve any copy that is used in conjunction with the photograph and release and discharge The Friends of Pool 9, and affiliates from any and all claims arising out of the use of the photograph for the purposes described above, including any claims for libel breach of copyright. I have read the foregoing and fully understand its contents.

SIGNATURE _____

DATE: _____