



**2017**

**JUNE 7<sup>TH</sup> – JUNE 11<sup>TH</sup>, 2017  
KEYSTONE CENTRE**

## Photo Contest Entry Form

Please complete one (1) entry form PER photograph entry.

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

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

City, Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

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

Title of Print: \_\_\_\_\_

Division: \_\_\_\_\_

Category: \_\_\_\_\_

<b>ENTRY FORM</b> (place on back of photo)	
Name:	
Division:	
Category:	
Title of Photo:	
Placing:	

<b>CLAIM TICKET</b> (bring with you to pick up your photo)	
Name:	
Division:	
Category:	
Title of Photo:	