

Amateur Photography Exhibit Entry and Permission
January through May
Please fill-out completely and clearly

Name _____

Date _____ **Phone** _____

Address _____ **City** _____ **Zip** _____

E-mail address ****unique to each household member to avoid notification confusion****:

REMINDER –Photos will NOT be returned

Entry #1 Name _____ **Photo Size** _____

Summit Metro Park Location _____

Entry #2 Name _____ **Photo Size** _____

Summit Metro Park Location _____

May photo committee change the name based on plant/animal Identification? Yes _____ or No _____

May photo committee crop enlargements? Yes _____ or No _____

I, the undersigned, grant permission to Summit Metro Parks to use copies or originals that I have submitted:

- In the Amateur Photography Exhibit (whether in-person and/or virtual)
- In future publications, programs, and/or exhibits

And further agree that Summit Metro Parks may use these photographs without further authorization from me and without need to provide name credit for my photographs.

SIGNED _____ **DATE** _____

OFFICE USE – ONLY

Entry #1 Selection YES _____ or NO _____ Entry #2 Selection YES _____ or NO _____

Date Entrant Notified of Selection Decision(s) _____

