

2019 Williamstown Township Photo Contest Submission Form

Photographer Information

Last:	First:	Date of Submission:
Address		
Home Phone:		Cell Phone:
Email Address:		
Age Category: <input type="radio"/> 18 & Over <input type="radio"/> 13-17 <input type="radio"/> 12 & Under		Birth Year:

About the Photograph

Title of Photograph:

Description of Photograph:

Name and phone number of all individuals who's faces are recognizable in photograph, if any. (Please submit permission document for each person or their guardian):

I acknowledge that I am the sole photographer and sole owner of the copyright for this image. I attest this photograph was taken within the boundaries of Williamstown Township. I agree to abide by all the rules of the Contest as described in the <i>2019 Williamstown Township Official Photo Contest Rules</i> document.
Signature of photographer or legal guardian:
Date:

Submit photograph with appropriate forms via email to clevelandr@williamstowntownship.com. All submissions will be acknowledged via email during regular office hours.

For Office Use Only	
Date/Time Received:	Submission #:
Received by:	
Notes:	