

NJLHS Photo Contest March 2020 Entry

[Judges Area _____]

Please Print

NAME: _____ PHONE # (_____) _____

ADDRESS: _____

CITY, STATE & ZIP: _____

EMAIL: _____

CATEGORY: (1) _____ (2) _____ (3) _____ (4) _____ (5) _____

TITLE OF WORK

SIGNATURE: GIVING NJLHS PERMISSION TO PUBLISH YOUR PHOTO ON THEIR WEBSITE & IN THEIR CALENDAR:

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