

### PHOTOGRAPH LABEL FORM

Fill out the label form & tape or glue to the foam or mat board backing of your photograph.

<b>NAME</b>			
<b>DIVISION (CHECK ONE) – JUNIOR OR CHILD MUST INCLUDE AGE</b>			
<input type="checkbox"/> ADULT	<input type="checkbox"/> JUNIOR	<input type="checkbox"/> CHILD	<input type="checkbox"/> PROFESSIONAL
AGE: _____	AGE: _____	AGE: _____	AGE: _____
ADDRESS: _____			
CITY: _____		STATE: _____	ZIP: _____
DAYTIME PHONE: _____			
EMAIL: _____			
CLASS NUMBER: _____			
DATE TAKEN & LOCATION OF PHOTO: _____			
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