



# Photo Contest Release and Entry Form

ENTRY INFORMATION	
Photographer Name:	Organization (optional):
Email:	Phone Number:
Street Address:	City:
State:	Zip Code:
Photo Title:	

Please include a brief description of your photo, including the county/location where photographed:

PLEASE SELECT A CATEGORY	
<b>Mountains &amp; Valleys [ ]</b>	<b>Small Wonders [ ]</b>
<b>Waterways [ ]</b>	<b>Winged Creatures [ ]</b>

Each photo must be submitted with a publicity release/permission to reprint photos. Please email this form/release(s) and image to [highlandsbiological@gmail.com](mailto:highlandsbiological@gmail.com) by June 21, 2017. This contest is open to the general public. All photos must be taken in the Highlands Plateau. Winning photos will be displayed at the Highlands Nature Center.

All accepted photos may be used in various media formats for an unlimited amount of time and at no cost to the Highlands Biological Foundation. Photo credit is not guaranteed for all uses of image. Contest entrants agree to all the rules and regulations set for and by the decisions made by the judges. Judges' decisions are final.



HIGHLANDS  
BIOLOGICAL FOUNDATION

### PUBLICITY RELEASE/PERMISSION TO REPRINT

By typing my name below, I hereby grant the Highlands Biological Foundation the right to use this photo entry for publishing, illustration, advertising, trade and promotion, or any other use in any medium for any purpose of HBF. I hold HBF harmless from any and all liability that might arise out of or result from the foregoing use. My entry signifies that I will abide by all rules, including that I will provide my true signature if my photo is selected.

Signature:

Date:

*If photographer is under 18, this form MUST be signed by a parent or legal guardian.*

Parental Signature:

Date:

**\*PLEASE INCLUDE A SIGNED MODEL RELEASE FOR EVERY RECOGNIZABLE PERSON IN THE PHOTO\***

### MODEL RELEASE

By typing my name below, I hereby grant Highlands Biological Foundation (HBF) the right to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of HBF and will not be returned. I hereby irrevocably authorize HBF to edit, alter, copy, exhibit, publish and distribute this photo for purposes of publicizing HBF's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge HBF from all claims, demands, and causes of action which, I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Signature:

Date:

*If model is under 18, this form MUST be signed by a parent or legal guardian.*

Parental Signature:

Date: