

Professional Photographers of Hawaii 2017 Quarterly Print Judging Entry Form

Name _____

Studio _____

City _____ Zip _____

Phone _____

PPH Member PPA Member MASTER'S category

Judging Month:

MAR
JUN
SEP
NOV

Entry Fee: \$12.00 (member's ONLY)
8 Entries Maximum

PRINT #	TITLE	CLASSIFICATION	SCORE	AWARD
1				
2				
3				
4				
5				
6				
7				
8				

CERTIFICATION:

THIS IS TO CERTIFY THAT I have created, composed and made the original exposures and that the processing, printing and any special effects were done by me. I have obtained all necessary releases and agree to hold the Professional Photographers of Hawaii association harmless against all claims and liabilities arising out of PPH's consideration, display, publication, or other use of each Entry or other materials submitted to PPH. ALSO: I have enclosed the \$12.00 entry fee. I understand that these Entries will not be judged if the appropriate fee is not enclosed.

Signature _____ Date _____

Professional Photographers of Hawaii

2017 Quarterly Print Competition

Payment Received of \$12 for **MAR JUN SEP NOV** print judging.

Cash Check



Received by _____ Date _____