



## WORKABILITY INTERNATIONAL—ANNUAL PHOTO CONTEST

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\_\_\_\_\_  
Signature of Model

\_\_\_\_\_  
Signature of Parent or Guardian, if applicable

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

WI Member Organization: \_\_\_\_\_

WI Member Organization Representative: \_\_\_\_\_

revised 2017



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### DETAILS OF PHOTO:

Electronic image/file name or number: \_\_\_\_\_

Location of photo taken: \_\_\_\_\_ Date photo taken: \_\_\_\_\_

Name(s) of models in order on image (left to right): \_\_\_\_\_

Description/Story of photo:

Photographer: \_\_\_\_\_

*revised 2017*