



IALHA

Calendar Photo Contest

Entry Form (submit one form per photograph)

Name of person submitting photo: _____

Photograph/ horse's name _____

Sire _____ Dam _____ Gender _____ IALHA Registration # _____

Photographer's name _____ Phone _____

Address _____

E-mail _____ Website _____

Facebook profile _____ Instagram profile _____

Horse Owner name _____ email _____

Facebook profile _____ Instagram profile _____

Breeder name _____ email _____

Facebook profile _____ Instagram profile _____

By signing below,

- I verify this is an original photograph taken by the person entered in "photographer's name" above. (If photographer and person submitting photo are not the same, the person submitting attests that they own the image and/or have permission from the photographer to enter the image in this contest and the conditions below.)
- I indicate my agreement to the Rules and Guidelines of the IALHA Calendar Photo Contest as outlined and agree to allow the use of this photo in the process to select the finalists and produce the annual calendar.
- If selected as a winner I also agree for the photo(s) to be used without restriction in whole or part, for promotion and advertisement of the IALHA.

Signature _____ Date _____