



Memorable Moments Entry Form

Name:

Email:

Address:

Phone Number:

Graduation Year and School/College:

Title, Description, and Value of Submission(s)

Entry 1:

Entry 2:

Entry 3:

Entry 4:

Entry 5:

If you are submitting in multiple emails, please make sure that each image is assigned a unique number in the file name (*johndoe1.jpg, johndoe2.jpg*) and labeled accordingly on the entry form. Please email this completed form with the photograph(s) to mm.umichunion@gmail.com.

NOTE: By submitting this entry form, you acknowledge that you agree to the guidelines of the Memorable Moments Photo Contest.