

Entry Form

2025 Photography Competition



ENTRANT

NAME _____

ADDRESS _____ PROV/TERR _____ POSTAL CODE _____

PHONE _____ EMAIL _____

SUBMISSION

CATEGORY [PICK ONE]: ☐ PUBLIC SPACE ☐ ARCHITECTURE ☐ INTERIOR ARCHITECTURE

PHOTO TITLE (IF ANY) _____

BUILDING/PROJECT/LOCATION _____

DATE PHOTO WAS TAKEN _____

CLIENT/OWNER (IF KNOWN) _____

ARCHITECT(S) (IF KNOWN) _____

SUBMISSION FILENAME _____

ADDITIONAL NOTES

CONFIRMATION

I confirm that I am the photographer or that I have the explicit permission of the photographer to submit this photograph. I hereby authorize NWTAA to edit, publish and distribute this photograph, freely and without compensation, at its discretion and without further notice. Under these terms, I accept that the NWTAA will sell a copy of my photograph at an upcoming fundraiser.

SIGNATURE OF ENTRANT

DATE