

SkillsUSA Champions Magazine Image Photo Submission Form

Check one: Photographer is a: Student Teacher

Photographer's Name: _____

Photographer's School: _____

School Address (Street or P.O. Box): _____

City: _____ State: _____ ZIP: _____

(if student) SkillsUSA Advisor/Teacher: _____

Address (if different from school address): _____

City: _____ State: _____ ZIP: _____

Daytime Telephone No.: _____

The photo I am submitting is: Color Black & White

The format of my photo is: Glossy print (8x10 min.) Digital file (300 ppi min.)

The photographer should review and sign the following statement:

I affirm by my signature that I am the photographer of the accompanying photo, and understand that I will be credited as the photographer. In addition:

- I give SkillsUSA and its representatives permission to print my photo in its magazine, as well as on the magazine section of its Web site and future association communications. SkillsUSA is a nonprofit organization and will not sell my photo to other parties.
- I will not give any other publications or Web sites permission to use this particular photo until a period of one year has passed from the date below, because SkillsUSA's editors may hold my photo for a later issue.
- I understand that SkillsUSA's editors are under no obligation to print any photo submitted that does not meet their editorial guidelines or quality standards.
- I understand that my photo will not be returned to me unless I expressly request it, and that SkillsUSA cannot assume liability for photos damaged in the mail.
- I affirm that I have obtained permission from all people whose images are in my photo to have this photo printed.

Photographer's Signature

Date

Teacher/Advisor

Mail to: Tom Hall, Director of Publications, SkillsUSA, P.O. Box 3000, Leesburg, VA 20177-0300.