

PLAY @ WORK PHOTOGRAPHY COMPETITION ENTRY FORM

Full Name			
Date of Birth		Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>
NRIC/Passport Number			
Residential Address			
Postal Code			
Phone Number (Home/Office)			
Handphone Number			
Category (tick one only)	Open <input type="checkbox"/>	Student <input type="checkbox"/>	
Photo Title			
Photo Description (not more than 100 words)			

By entering this competition, I accept and agree to abide by the terms and conditions of this competition. I understand that photos submitted to this contest may be used by the Singapore Heart Foundation and that all entries become and remain the property of the Singapore Heart Foundation and may be used without permission or credit. In addition, I understand that CDs or hardcopies submitted will not be returned.

I declare that the above information is accurate and consent to my personal information being registered by the Singapore Heart Foundation for the purposes of the present.

Participant's signature:

Date: