



Texas Mushroom Festival Amateur  
Photography Contest  
DEADLINE OCTOBER 4<sup>TH</sup>, 2024  
COST - \$5.00 PER ENTRY

Entry #
_____
For Office Use

**Contact with any questions:** Dennum Hudson  
Phone: [936.714.1934](tel:936.714.1934)  
Email: [info@txmushfest.org](mailto:info@txmushfest.org)

**Drop off locations in Madisonville:** Kimbro Center - 113 W Trinity  
Woodine Inn - 209 N Madison St

**Mail in location:** P.O. Box 695

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**CATEGORIES:** (Check the appropriate category - one form per photo )

- |   |   |
|---|---|
| <input type="checkbox"/> Mushrooms (black & white or color) | <input type="checkbox"/> Floral   |
| <input type="checkbox"/> Landscapes                         | <input type="checkbox"/> Open (photos that do not fit another category) |
| <input type="checkbox"/> Animals/All Critters               | <input type="checkbox"/> Black & White                                  |
| <input type="checkbox"/> People                             |   |

**\*\*You must choose the category that is most appropriate for your entry. The judges will NOT make that decision for you.**

**Division (circle one):**    student (12<sup>th</sup> grade & below)                      adult (18 & over)

Title of Photograph: \_\_\_\_\_

Location where photo was taken: \_\_\_\_\_

**RELEASE:** *By signing below, I agree to all contest rules. If the photo contains a person, the subject in the photo hereby gives permission to allow the Texas Mushroom Festival to use this photo in any advertising media to promote the Festival. I also understand that if I have not submitted the required entrance fee, my photo will not be entered. NOTE: Pictures of minors require the signature of a parent or guardian.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make checks payable to: **Texas Mushroom Festival.**

<b>For Office Use</b>				
Received _____	Credit card _____	Money order _____	Cash _____	Check # _____