## Members' challenge

**Looking Through** 

2015/2016

## **ENTRY FORM**

Please complete, print and enclose with your entry

Membership No:	
Membership No:  First name:  La	st name:
Address:	
Phone Number: email:	
Region:	
Branch (if applicable)	
Advise receipt using:	
Description of entry	
Insurance value (estimate)	
Return address	
I give permission for this work to be exhibited, photographed, published in the Guild's journals, magazines and electronic media and, if selected, in promotional materials prepared by national or local exhibitors.  Signed:  Date:	IMAGE OF YOUR ENTRY
Please ensure that you enclose a stamped addressed	

Please ensure that you enclose a stamped addressed envelope or postcard or email address in order to inform you of the arrival of your entry.