



Charlottesville, VA

Carter Mountain Orchard Photo Contest
Entry Form

Name _____

Address _____

City/State/Zip _____

Phone _____

E-mail _____
(we won't share any of this with any one else)

Names of everyone in the photo _____

(if applicable) _____

I agree to the rules of this Photo Contest as set forth by Carter Mountain Orchard.

Signature _____

THIS FORM MUST BE COMPLETELY FILLED OUT FOR YOUR ENTRY TO BE ELIGIBLE.

Please mail this form, (one for each photo), along with your photo, to:

Carter Mountain Orchard
Photo Contest
PO Box 299
Batesville VA 22924

ENTRIES MUST BE RECEIVED BY NOVEMBER 15, 2009 TO BE ELIGIBLE