



KLAEIDOSCOPE OF KEUKA

Permission for use of photographs
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Total number of pictures submitted: _____

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Yes, I give the Keuka Lake Association (KLA) permission to use my photograph(s) or digital image(s) in the KLAEidoscope of Keuka collection. In addition, I agree that the KLA has the right to reproduce the photographs for display on the KLA website, in KLA newsletter or printed materials, or for informational or promotional purposes for the KLA. I confirm that the photograph or image I submitted represents my original work.

Signature: _____

Date: _____

Please return signed form to:

Keuka Lake Association

PO Box 35

Penn Yan, NY 14527

Email: info@keukalakeassoc.org