

Control Number _____ (leave blank)

PSA Youth Showcase Fillable PROJECTED Entry Form

Due April 4, 2025 (11:59 PM EDT)

Image Title _____

(Title shall not exceed 25 characters, including spaces.)

Sponsor's Rep _____

Category (check one) ARCH PORA SCAP PJOU CCHOI MCHOI

Student's Name _____ Age _____ HOME email _____

Home Address _____ Phone _____

City _____ State _____ Zip/Code _____ Country _____

Name of School _____

Teacher's Name _____ Email _____

A Model Release form is necessary for any image with a posed recognizable person by face, other than in the Photojournalism category.