

Philippine Statistics Authority

2015 Census of Population

“People, Places, and Events of POPCEN 2015”

Nationwide Photography Contest

for Philippine Statistics Authority Employees

ENTRY FORM

Category	<input type="checkbox"/> Conventional <input type="checkbox"/> Mobile				
Name					
Address					
Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Birthday (month/day/ year)		Age
Contact No.		Occupation/ Position			
Photo details					
Camera (brand/model)					
Location of photo (town/municipality/city, province)					
Date when the photo was taken (month/day/year)					
Caption for the photo					

To be completed by individual(s) (parents/guardians if subject is less than 18 years of age) who appear in any photographs taken.

Photography Consent Form

The Philippine Statistics Authority would like to take your photograph for documentation purposes. These images may be used for our publications or on our website.

Person(s) in photograph

I agree to allow Mr./Ms. _____ of the Philippine Statistics Authority (PSA) to take photographs of me and grant permission for these to be used by the PSA to promote participation in the Census of Population in documentations, publications, press articles, promotional material and websites, exclusively for non-profitmaking purposes.

Name (please print):

Contact email address or telephone number:

Signature: Date:

I also agree to my name being published in any associated publicity if required.

Yes No

We will not use the images taken, or any other information you provide, for any other purpose.

Permission of parent/guardian if person photographed is less than 18 years of age

I agree to allow Mr./Ms. _____ of the Philippine Statistics Authority (PSA) to take photographs of the child(ren) in my charge and grant permission for these to be used by the PSA to promote participation in the Census of Population in documentations, publications, press articles, promotional material and websites, exclusively for non-profitmaking purposes.

Name of child (please print): Age:

Parent/Guardian name (please print):

Contact email address or telephone number:

Signed: Date:

I also agree to the child's name being published in any associated publicity if required.

Yes No

We will not use the images taken, or any other information you provide, for any other purpose.