



## **CJEM Photo Contest 2025 Submission Form**

First Name:

Last Name:

E-mail address:

Telephone number:

Mailing address:

Academic affiliation:

Description of photo:

Submission number:

(Max of 5, each should have a separate submission form)

**Return completed forms along with photo to [cjem@caep.ca](mailto:cjem@caep.ca)**