

# Photo Insertion Order

Please help us help you – use this form when submitting photographs to CFA.

*This form is available on-line at: <http://www.cfa.org/forms>*



The Cat Fanciers' Association, Inc.

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PO Box 1005  
Manasquan, NJ 08736-0805

## Instructions:

1. Complete one form for each photo submitted.
2. Send a copy of this form to photographer at the time photo is ordered.
3. E-mail a copy of this form to [publications@cfa.org](mailto:publications@cfa.org) or mail to the address at right.

## Cat Information

Cat's Registration Number\* \_\_\_\_\_ Date \_\_\_\_\_

Cat's Name\* \_\_\_\_\_

Breed / Division\* \_\_\_\_\_ Color\* \_\_\_\_\_

## Customer Contact Information *(For Internal Use Only — Not For Publication)*

Customer Name\* \_\_\_\_\_

Daytime Phone\* \_\_\_\_\_ Daytime E-mail \_\_\_\_\_

## Photographer Information

Photographer Name \_\_\_\_\_

Photographer E-mail \_\_\_\_\_ Phone \_\_\_\_\_

## Photograph Use Statement *(Check all that apply)*

Purpose of Photo	Ad Type	Publication
<input type="checkbox"/> Advertisement <input type="checkbox"/> Article <input type="checkbox"/> Awards Dinner <input type="checkbox"/> Almanac Cover ** <input type="checkbox"/> DM <input type="checkbox"/> Grand <input type="checkbox"/> Yearbook: National Award Section  ** 8 <sup>3</sup> / <sub>4</sub> " by 11 <sup>1</sup> / <sub>4</sub> ". Allow 2" above photo for magazine masthead.	<input type="checkbox"/> Black & White <input type="checkbox"/> Color  <input type="checkbox"/> Full Page <input type="checkbox"/> Full Page Bleed (Photo size 8 <sup>3</sup> / <sub>4</sub> " by 11 <sup>1</sup> / <sub>4</sub> " ) <input type="checkbox"/> Half Page <input type="checkbox"/> Half Page Bleed (Photo size 7 <sup>3</sup> / <sub>16</sub> " by 4 <sup>3</sup> / <sub>4</sub> " cropped area) <input type="checkbox"/> Quarter Page (Black & White only) <input type="checkbox"/> Other _____ (please specify)	<input type="checkbox"/> Yearbook <input type="checkbox"/> Almanac  <b>Almanac Issue(s)</b> <i>Advertisements Only</i> <input type="checkbox"/> Dec/Jan <input type="checkbox"/> Feb/Mar <input type="checkbox"/> Apr/May <input type="checkbox"/> Jun/Jul <input type="checkbox"/> Aug/Sep <input type="checkbox"/> Oct/Nov

***If you are providing a printed photograph and it is to be returned to you,  
PLEASE SUBMIT A SELF-ADDRESSED STAMPED ENVELOPE!***

\* Required Information