Mail photographs with this entry form to:
Westport Historical Society
PO Box 3031
Westport MA 02790

Name: _____

Address: _____

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Phone #_____

Contestant division: ☐ Youth (under 18) ☐ Adult (18 and over)

Category:
☐ Working Westport
☐ People at Play/People at Home
☐ Endangered and Unique Westport
☐ Celebrations and traditions
☐ Growing up in Westport
☐ Village Life/Rural Life

Please include a short explanation about this image:

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