



## CALGARY HOLOCAUST SURVIVOR PHOTOGRAPHY EXHIBIT

**Name of Survivor** \_\_\_\_\_

Date of Birth (mm/dd/yy) \_\_\_\_\_ Place of Birth \_\_\_\_\_

Date of Death (mm/dd/yy) \_\_\_\_\_ Place of Death \_\_\_\_\_

**Form Completed By**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Relationship to Survivor \_\_\_\_\_

Date (mm/dd/yy) \_\_\_\_\_

**Headshot of the Survivor** – Send the most recent photo in their older years (how they looked towards the end of their life). We will be working with a photographer who can crop and edit the photo if necessary.

**Survivor’s Experience** – Details may include: Pre-war family life/experience, names of concentration camps, where they were during the war, hiding places, people who helped them, etc.

**Message from the Survivor** – This may be a quote taken from their testimony or your own words on their behalf. Ideas:

- What would they have wanted to share with the world?
- What was their outlook on life?
- What was important to them?
- What advice or hope did they have for future generations?
- What did you learn from them?

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**For More Information** – Email: [holocaustedu@jewishcalgary.org](mailto:holocaustedu@jewishcalgary.org)