



FOCUS ON SAFETY

Youth Video Contest*

| Student's name (Individual entrant or team leader, if this is a | a team entry): | | | | | |
|--|----------------------|---|------------------------------|--------------------------------------|--|--|
| Student's address: | | | | | | |
| City: | Province: | Postal code: | Telephone: | | | |
| Email: | | | | | | |
| Student's current grade level: | Type of entry: | Individual Team (Names and signatures of all te | am members must be listed in | the Team Entry section of the form.) | | |
| Is this entry part of a class assignment? | No Yes | | | | | |
| Which semester was this entry completed? 1st 2nd | | | | | | |
| | What is t | he name of the class? | | | | |
| Video title: | | | Length of submission: | | | |
| Video submission: Please send a Dropbox link containing your video Email subject line must contain the name of your Dropbox Link: | | | le to download and sav | e your video file. | | |
| If this is a team entry and students are from more tha will be eligible for the corresponding contest prize if t | n one school, please | | | | | |
| School name: | | | | | | |
| School address: | | | | | | |
| City: | Province: | Postal code: | Telephone: | | | |
| Teacher sponsor/School representative: | | | | | | |
| Email: | | | | | | |
| Teacher/School representative signature: | | | | | | |

I have viewed the video submission: Yes No

Consent and Release

I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the Focus on Safety Youth Video Contest Rules), and certify that all information contained in this completed entry form is true and accurate. By signing this entry form, I irrevocably grant the contest organizers the right and permission to:

(1) publicly disclose and use my name, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation; and, (2) copy, modify, play and use the video submission (the "Video"), accompanying this entry form in whole or in part, without compensation.

The Video has been originally and lawfully created by me or my team and the use, modification, play or reproduction of the Video by the contest organizers will not give rise to any third party claims for infringement or violation of copyright, trademark or any other right of any third party, or to any third party claims including libel, defamation, violation of privacy or contract breach. I have obtained all necessary permissions, consents, licenses or other approvals of third parties (including, but not limited to, all individuals appearing in the Video and all holders of copyright in any copyrighted music, images or other materials used in the Video) necessary or appropriate for the preparation or use of the Video and such approvals are enclosed. I release the contest organizers from any liability in connection with my participation in this contest, or the preparation or use of my or my team's Video and agree to indemnify the contest organizers for any liability and all reasonable costs arising from any third party action, claim or proceeding commenced against the contest organizers because of the Video.

| | | _ Age: | | Date: | |
|--|--|------------------------|------------------------|---------------------------|---|
| Consent of Parent or Guardian (required if student signing above | is a minor [under 18 years of age]) | | | | |
| l, the parent or guardian of the above-named minor, agree below, hereby voluntarily join in the foregoing Consent and | | s on Saf | ety You | ıth Vide | o Contest and, by signing |
| Signature: (Must be signed before submitting) | | | | | |
| Name: | | Date: | | | |
| The personal information you have provided to WorkSafeNB on this for win a prize. If you win a prize, only your name, age, high school and his broadcasting your video. WorkSafe NB follows New Brunswick legislations the collection, use, disclosure and the collection, use, disclosure and the collection. | gh school location (city of town) will be publi ion, accepted privacy standards, and accepted | shed and, privacy p | or share orinciples | ed with the s to prote | nird parties for the purpose of ct the personal information |
| | TEAM ENTRY d signatures for each additional meml | per of yo | our tear | n. | |
| Student #2 Student's name: | Age: | | Da | nte: | |
| zeadenes name. | | | | | Province: |
| Student's address: | City: | | | | |
| | Email: | | | | |
| Postal code: Telephone: | | | | | |
| Postal code: Telephone: Signature: Consent of Parent or Guardian (required if student signing above I, the parent or guardian of the above-named minor, agree below, hereby voluntarily join in the foregoing Consent and | is a minor [under 18 years of age]) that they may participate in the Focu | s on Saf | ety You | ıth Vide | o Contest and, by signing |

The personal information you have provided to WorkSafeNB on this form is required to verify your eligibility to the contest, administer the contest and contact you if you win a prize. If you win a prize, only your name, age, high school and high school location (city of town) will be published and/or shared with third parties for the purpose of broadcasting your video. WorkSafe NB follows New Brunswick legislation, accepted privacy standards, and accepted privacy principles to protect the personal information submitted to us. Questions regarding the collection, use, disclosure and retention of your information may be directed to: videocontest@ws-ts.nb.ca.

| tudent #3 | |
|--|--|
| tudent's name: | Age: Date: |
| tudent's address: | City: Province: |
| ostal code: Telephone: | Email: |
| ignature: | |
| Consent of Parent or Guardian (required if student signing above is a the parent or guardian of the above-named minor, agree to below, hereby voluntarily join in the foregoing Consent and | that they may participate in the Focus on Safety Youth Video Contest and, by signir |
| Name: | Date: |
| | |
| he personal information you have provided to WorkSafeNB on this forn rize. If you win a prize, only your name, age, high school and high scho our video. WorkSafe NB follows New Brunswick legislation, accepted p | m is required to verify your eligibility to the contest, administer the contest and contact you if you wool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to ur information may be directed to: videocontest@ws-ts.nb.ca. |
| the personal information you have provided to WorkSafeNB on this form rize. If you win a prize, only your name, age, high school and high scho our video. WorkSafe NB follows New Brunswick legislation, accepted p uestions regarding the collection, use, disclosure and retention of your | ool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to |
| tudent #4 | ool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to |
| tudent's name: | ool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to ur information may be directed to: videocontest@ws-ts.nb.ca. |
| the personal information you have provided to WorkSafeNB on this formorize. If you win a prize, only your name, age, high school and high school our video. WorkSafe NB follows New Brunswick legislation, accepted p Questions regarding the collection, use, disclosure and retention of your student #4 Student's name: | ool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to ur information may be directed to: videocontest@ws-ts.nb.ca. Age: Date: |
| orize. If you win a prize, only your name, age, high school and high school our video. WorkSafe NB follows New Brunswick legislation, accepted p Questions regarding the collection, use, disclosure and retention of your student #4 Student's name: Student's address: Postal code: Telephone: | ool location (city of town) will be published and/or shared with third parties for the purpose of broaprivacy standards, and accepted privacy principles to protect the personal information submitted to ur information may be directed to: videocontest@ws-ts.nb.ca. Age: Date: Province: |
| The personal information you have provided to WorkSafeNB on this formorize. If you win a prize, only your name, age, high school and high school our video. WorkSafe NB follows New Brunswick legislation, accepted p Questions regarding the collection, use, disclosure and retention of your student's name: Student #4 Student's address: Postal code: Telephone: Signature: Consent of Parent or Guardian (required if student signing above is | ool location (city of town) will be published and/or shared with third parties for the purpose of broad privacy standards, and accepted privacy principles to protect the personal information submitted to ur information may be directed to: videocontest@ws-ts.nb.ca. Age: Date: City: Province: Email: is a minor [under 18 years of age]) that they may participate in the Focus on Safety Youth Video Contest and, by signir |

The personal information you have provided to WorkSafeNB on this form is required to verify your eligibility to the contest, administer the contest and contact you if you win a prize. If you win a prize, only your name, age, high school and high school location (city of town) will be published and/or shared with third parties for the purpose of broadcasting your video. WorkSafe NB follows New Brunswick legislation, accepted privacy standards, and accepted privacy principles to protect the personal information submitted to us. Questions regarding the collection, use, disclosure and retention of your information may be directed to: videocontest@ws-ts.nb.ca.

| Student #5 | | | | | |
|---|---|--|--|--|-----------------------------------|
| Student's name: | | | Age: | Date: | |
| Student's address: | | | City: | | Province: |
| Postal code: | Telephone: | Ema | nil: | | |
| Signature: | | | | | |
| Consent of Parent or Guardian I, the parent or guardian of the a below, hereby voluntarily join in | above-named minor, agree | that they may participa | | afety Youth Video (| Contest and, by signing |
| Name: | | | Date: | | |
| Signature: (Must be signed before subr | nitting) | | | | |
| The personal information you have proprize. If you win a prize, only your nam your video. WorkSafe NB follows New Questions regarding the collection, uso | e, age, high school and high sch Brunswick legislation, accepted | nool location (city of town) wi privacy standards, and accept | II be published and/or sed privacy principles to | hared with third parti protect the personal i | es for the purpose of broadcastir |
| How did you hear about this cor | itest? (check one) | | | | |
| At school: promotional pos | ter | | | | |
| At school: from your teacher | er . | | | | |
| Other (please describe) | | | | | |
| | | | | | |

 $\hbox{\rm *With support from the Canadian Centre for Occupational Health and Safety (CCOHS)}\\$