



## **FOCUS ON SAFETY**

## **Youth Video Contest\***

Student's name (Individual entrant or team leader, if this is 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 team members must be listed in the Team Entry section of the form.)
Is this entry part of a class assignment?
Which semester was this entry completed?
Video title: Length of submission:
Video submission: (must be 2 minutes or less)
Email subject line must contain the name of your school and the name of your video.
Link:
School Information  If this is a team entry and students are from more than one school, please specify which school will sponsor the team for the purposes of this contest. That school will be eligible for the corresponding contest prize if the team's video wins a prize in their jurisdiction, or a national prize as specified in the contest rules.
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.

<del></del>		_ 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.

itudent's name:		
	Age: Date:	
tudent's address:	City: Province	ce:
ostal code: Telephone:	Email:	
gnature:		
onsent of Parent or Guardian (required if student signing above is a the parent or guardian of the above-named minor, agree th elow, hereby voluntarily join in the foregoing Consent and R	nt they may participate in the Focus on Safety Youth Video Contest and,	by signin
ame:	Date:	
gnature: (Must be signed before submitting)		
	accepted privacy standards, and accepted privacy principles to protect the personal in tention of your information may be directed to: <b>videocontest@ws-ts.nb.ca</b> .	oose of nformation
bmitted to us. Questions regarding the collection, use, disclosure and re		
bmitted to us. Questions regarding the collection, use, disclosure and re		
tudent's name:	tention of your information may be directed to: videocontest@ws-ts.nb.ca.	nformation
tudent's name:  tudent's address:	Age: Date:	nformation
tudent #4 tudent's name:  tudent's address:  Telephone:	Age: Date: Province	nformation
tudent #4 tudent's name:  tudent's address:  ostal code:  Telephone:  ignature:  onsent of Parent or Guardian (required if student signing above is a	Age: Date:  City: Province  Email:  Date: Province  Date: Prov	ce:

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)					

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