

2010
Save a friend. Work safe.

PUBLIC SERVICE ANNOUNCEMENT
video contest

ENTRY FORM FOR VIDEO PRODUCER(S)

(See form for video participants and copyright clearances on the next page.)

Title of production

Video name: _____ Video length: _____

Primary contact (Please print clearly. If this was a team effort, list team members on next page.)

Student's name: _____

Age: _____ Grade: _____ Phone number: (____) _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

School name: _____

How did you hear about the contest?

Teacher Friend Facebook Website (DCBS) Other _____

School/teacher information (Complete only if this was a school project.)

Teacher's name: _____

Phone number: (____) _____ Email: _____

School name: _____

School address: _____

City: _____ State: _____ Zip: _____

I authorize use of my public service announcement video in presentations and informational materials provided that credit is given to the artist(s).

Primary video producer signature: _____ Date: _____

*Parent/guardian signature (if <18): _____ Date: _____

See **Video Contest Guidelines** for entry rules and requirements at www.orosha.org/psacontest.
Mail entry to: Young Worker Video Contest, Oregon OSHA, Attn: Yutonah Bowes, PO Box 14480, Salem, OR 97309.
Videos must be postmarked or received no later than 4:00 p.m., February 15, 2010 to be eligible.

*If participant is under 18 years of age, parent/guardian signature is required.

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ENTRY FORM FOR VIDEO PARTICIPANTS

I authorize use of my public service announcement video in presentations and informational materials provided that credit is given to the artist(s) and I understand that I may be contacted by the media to discuss this contest.

Video participants (Please print clearly. Add additional pages if necessary.)

Name: _____ Age: _____ (must have parent/guardian signature if under 18.)

Phone number: (____) _____ Email: _____

Signature: _____ Date: _____

*Parent/guardian signature: _____ Date: _____

Name: _____ Age: _____ (must have parent/guardian signature if under 18.)

Phone number: (____) _____ Email: _____

Signature: _____ Date: _____

*Parent/guardian signature: _____ Date: _____

Name: _____ Age: _____ (must have parent/guardian signature if under 18.)

Phone number: (____) _____ Email: _____

Signature: _____ Date: _____

*Parent/guardian signature: _____ Date: _____

Name: _____ Age: _____ (must have parent/guardian signature if under 18.)

Phone number: (____) _____ Email: _____

Signature: _____ Date: _____

*Parent/guardian signature: _____ Date: _____

Copyright clearances and information - VERY IMPORTANT

List all audio and visual sources (music, video footage, etc.)

Permission signature or attach documentation

1. _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

*If participant is under 18 years of age, parent/guardian signature is required.