

The Traffic Safety Program of the Santa Cruz County Health Services Agency

2016 Traffic Safety Video PSA Contest for Teens

Official Entry Form

You can submit this form two ways:

1. Print, sign and mail to:

Tara Leonard

Video PSA Contest

Santa Cruz County Health Services Agency

1070 Emeline Avenue, Building G

Santa Cruz, CA 95060

2. Print, sign and scan.

Then attach to an email along with your video URL to

tara.leonard@santacruzcounty.us.

*** Note: If working as a group, EACH student and his/her parent or guardian must sign and submit an Official Entry Form to enter the contest. ***

With my signature below, I confirm that:

1. I live in Santa Cruz County.
2. I have supplied accurate information on this **Official Entry Form**.
3. The video I have submitted does not violate copyright law and is the result of my own or my group's own creativity.
4. I understand that if copyrighted material is used without permission it will result in automatic disqualification.
5. I understand that the video I have submitted may be shared by the Health Services Agency (HSA) for publicity, education and general communication purposes.
6. I have read and understand the **Official Rules and Guidelines** of the contest, located at www.sctrafficsafety.org.
7. To be eligible, my video URL must be submitted by 5 p.m. on March 25 to tara.leonard@santacruzcounty.us.
8. This signed **Official Entry Form** must be submitted by 5 p.m. on March 25, either by email or ground mail (see directions, above).
9. I understand the Health Services Agency may use my name, photo and biographical information for publicity and general communication purposes.

Release of Liability

In consideration for being allowed to participate in the contest discussed herein, I, on behalf of myself, my family, my heirs, and my executors, hereby release and hold harmless from liability the County of Santa Cruz, the Santa Cruz County Health Services Agency, and their officers, employees, successors, representatives or assignees, for any and all injuries that may be suffered by me as a result of my activities associated with the contest.

(Please continue to second page.)

Contact Information

Winners will be notified by phone, so be sure to include a current phone number*. Contact information is confidential and will not be used outside the contest.

Student Name: _____

Name of Video: _____

Topic of Video: _____

Name of Other Students (if working as a group): _____

Link to Online Video URL: _____

*Student Phone: _____

Name of Middle or High School Attending: _____

Name of Teacher (If video was developed in a class): _____

Phone Number for School or Teacher: _____

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

If you have questions or concerns about submitting this form, please contact Tara Leonard at (831) 454-5412.