



# 2017 PEI High School Video Contest

## Student Entry Form

**Prior to submission:** Contestants must read all the rules and complete all appropriate sections of the official entry form including all required signatures and ensure that any applicable copyright permissions are obtained and attached to entry.

Video submissions must be labeled as described below and accompanied by a fully completed official entry form to be considered a valid entry. The contest organizers are not responsible for entries which are delayed, lost, misdirected, incomplete, damaged or destroyed. Any entry that is tampered with, unreadable or mutilated will be disqualified.

In the case where contestants provide the contest with a link to their video submission on a publicly accessed site, contestants are solely responsible for ensuring the link is a valid link that takes the contest directly to their submission, the link remains valid for the duration of the contest and that the contest can download the video from where the contestant has posted their video. Entries not meeting these criteria will be disqualified.

**Video Submission:** It is the sole responsibility of the contestant to ensure video submission is received between **February 1, 2017** and the contest closing date, **Friday, March 31, 2017 at 11:59 p.m., Atlantic Daylight Saving Time.**

Contestants can submit their video and entry form in one of two ways, electronically or by mail. Please **do not** use both, or a combination of the two. (In other words, do not **email** your entry form and **mail** your video.)

Every video entry must be accompanied by the official contest entry form. Entries must be submitted to the address indicated below:

**Electronically:** Email your contest entry form, the title of your video and the direct link to video on a publicly accessed site to **videocontest@wcb.pe.ca**

**By mail:** The video entry must be clearly labeled with your video's title, your (or team leader's) name, mailing address and telephone number and be accompanied by the fully completed video contest entry form, and sent to:

**PEI High School Video Contest  
Workers Compensation Board of PEI  
PO Box 757, Charlottetown, PE C1A 7L7**

*The contest organizers will not be responsible for damage to videos resulting from shipping or handling. The contest organizers are not responsible for telephone, computer or network malfunction or error, whether technical or human in nature, communication disruption, or other forces beyond the reasonable control of the contest organizers. The contest organizers reserve the right to correct any typographical, printing, computer programming or operator errors.*

## ENTRY FORM - PRINCE EDWARD ISLAND HIGH SCHOOL STUDENTS

Student's Name (Individual entrant, or team leader if this is a team entry):				
Student's Home Address				
City	Province	Postal Code	Telephone No. ( )	E-mail
Student's Current Grade Level	Type of Entry: <input type="checkbox"/> Individual OR <input type="checkbox"/> Team (Names and signatures of all team members to be listed in the Team Entry section of the form)			
Is this entry part of a class assignment? <input type="checkbox"/> No <input type="checkbox"/> Yes                    If yes, which semester this entry was completed. <input type="checkbox"/> first    OR <input type="checkbox"/> second Name of the class:				
Video Title			Length of submission:	
Video submission  <input type="checkbox"/> Submitted on a properly labeled DVD or memory stick with this entry form (mailed in) -or- <input type="checkbox"/> Contest video submission is posted at the following url/link: _____  (Note: URL must be exact. Ensure that there are no typos and that the url takes the contest judges directly to your video. The link must remain intact until May 1, 2017. The video must be downloadable from this site by the contest judges.)				
<b>School Information (must be completed for all high school entries)</b> If this is a team entry and students are from more than one school, 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 first prize in their jurisdiction or a national prize as specified in the contest rules.				
School Name				
School Address				
City	Province	Postal Code	Telephone No. ( )	
Supervising Teacher			Email address:	
I have viewed the video submission. <input type="checkbox"/> Yes <input type="checkbox"/> No  Signature of Supervising Teacher:				

## Consent, Authorization and Release

I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the 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 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.

I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my information collected in relation to this contest, including my personal information as defined in the *Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01*, and including the public disclosure and use of my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.

Student Signature	Age	Date
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## Consent of Parent or Guardian (required if student signing above is a minor, i.e. under 18 years of age)

I, the parent or guardian of the above-named minor, agree that s/he may participate in the PEI High School Video Contest and, by signing below, I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my child's information collected in relation to this contest, including his/her personal information as defined in the *Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01*, and including the public disclosure and use of his/her name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.

Signature (must be signed before submitting)	Name	Date
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*Personal information collected in order to administer the video contest is done so under the authority of the Occupational Health and Safety Act and is in compliance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, 14 Weymouth Street, P.O. Box 757, Charlottetown, PE C1A 7L7, (902) 368-5680 or toll free at 1-800-237-5049.*

*If you have any questions about the video contest you may direct them to [videocontest@wcb.pe.ca](mailto:videocontest@wcb.pe.ca)*

**If this is a Team Entry, include information and signatures for each additional member of your team**

<b>Student #2</b>				
Student's Name (please print in block letters)				
Student's Address				
City	Province	Postal Code	Telephone ( )	E-mail
<p><b>Consent, Authorization and Release</b></p> <p>I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the 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 copy, modify, play and use the video submission (the "Video"), accompanying this entry form in whole or in part, without compensation.</p> <p>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.</p> <p>I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my information collected in relation to this contest, including my personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Student Signature			Age	Date
<p><b>Consent of Parent or Guardian (required if student signing above is a minor, i.e. under 18 years of age)</b></p> <p>I, the parent or guardian of the above-named minor, agree that s/he may participate in the PEI High School Video Contest and, by signing below, I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my child's information collected in relation to this contest, including his/her personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of his/her name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Signature (Must be signed before submitting)		Name		Date
<p><i>Personal information collected in order to administer the video contest is done so under the authority of the Occupational Health and Safety Act and is in compliance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, 14 Weymouth Street, P.O. Box 757, Charlottetown, PE C1A 7L7, (902) 368-5680 or toll free at 1-800-237-5049.</i></p> <p><i>If you have any questions about the video contest you may direct them to <a href="mailto:videocontest@wcb.pe.ca">videocontest@wcb.pe.ca</a></i></p>				

<b>Student #3</b>				
Student's Name (please print in block letters)				
Student's Address				
City	Province	Postal Code	Telephone ( )	E-mail
<b>Consent, Authorization and Release</b>				
<p>I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the 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 copy, modify, play and use the video submission (the "Video"), accompanying this entry form in whole or in part, without compensation.</p> <p>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.</p> <p>I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my information collected in relation to this contest, including my personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Student Signature			Age	Date
<b>Consent of Parent or Guardian (required if student signing above is a minor, i.e. under 18 years of age)</b>				
<p>I, the parent or guardian of the above-named minor, agree that s/he may participate in the PEI High School Video Contest and, by signing below, I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my child's information collected in relation to this contest, including his/her personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of his/her name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Signature (Must be signed before submitting)		Name		Date
<p><i>Personal information collected in order to administer the video contest is done so under the authority of the Occupational Health and Safety Act and is in compliance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, 14 Weymouth Street, P.O. Box 757, Charlottetown, PE C1A 7L7, (902) 368-5680 or toll free at 1-800-237-5049.</i></p> <p><i>If you have any questions about the video contest you may direct them to <a href="mailto:videocontest@wcb.pe.ca">videocontest@wcb.pe.ca</a></i></p>				

<b>Student #4</b>				
Student's Name (please print in block letters)				
Student's Address				
City	Province	Postal Code	Telephone ( )	E-mail
<b>Consent, Authorization and Release</b>				
<p>I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the 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 copy, modify, play and use the video submission (the "Video"), accompanying this entry form in whole or in part, without compensation.</p> <p>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.</p> <p>I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my information collected in relation to this contest, including my personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Student Signature			Age	Date
<b>Consent of Parent or Guardian (required if student signing above is a minor, i.e. under 18 years of age)</b>				
<p>I, the parent or guardian of the above-named minor, agree that s/he may participate in the PEI High School Video Contest and, by signing below, I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my child's information collected in relation to this contest, including his/her personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of his/her name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Signature (Must be signed before submitting)		Name		Date
<p><i>Personal information collected in order to administer the video contest is done so under the authority of the Occupational Health and Safety Act and is in compliance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, 14 Weymouth Street, P.O. Box 757, Charlottetown, PE C1A 7L7, (902) 368-5680 or toll free at 1-800-237-5049.</i></p> <p><i>If you have any questions about the video contest you may direct them to <a href="mailto:videocontest@wcb.pe.ca">videocontest@wcb.pe.ca</a></i></p>				

<b>Student #5</b>				
Student's Name (please print in block letters)				
Student's Address				
City	Province	Postal Code	Telephone ( )	E-mail
<b>Consent, Authorization and Release</b>				
<p>I, the undersigned, have read, understand and agree to abide by the rules governing the contest (as set out in the 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 copy, modify, play and use the video submission (the "Video"), accompanying this entry form in whole or in part, without compensation.</p> <p>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.</p> <p>I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my information collected in relation to this contest, including my personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Student Signature			Age	Date
<b>Consent of Parent or Guardian (required if student signing above is a minor, i.e. under 18 years of age)</b>				
<p>I, the parent or guardian of the above-named minor, agree that s/he may participate in the PEI High School Video Contest and, by signing below, I hereby consent and authorize the Workers Compensation Board of Prince Edward Island to release any and all of my child's information collected in relation to this contest, including his/her personal information as defined in the <i>Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01</i>, and including the public disclosure and use of his/her name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation.</p>				
Signature (Must be signed before submitting)		Name		Date
<p><i>Personal information collected in order to administer the video contest is done so under the authority of the Occupational Health and Safety Act and is in compliance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, 14 Weymouth Street, P.O. Box 757, Charlottetown, PE C1A 7L7, (902) 368-5680 or toll free at 1-800-237-5049.</i></p> <p><i>If you have any questions about the video contest you may direct them to <a href="mailto:videocontest@wcb.pe.ca">videocontest@wcb.pe.ca</a></i></p>				