



Official Entry Form

Teacher		School
School's Address		
City	Postal Code	School Telephone No.

Student's Name (please print in block letters)		Project Leader or Team name	
Student's Address			
City	Postal Code	Telephone	E-mail
Student's Current Grade Level:	Is this submission: <input type="checkbox"/> Individual OR <input type="checkbox"/> Team Effort (please list additional team members here. Each team member must complete and submit a signed form.)		
Class	Project Title		

Consent and Release:

The undersigned, have read, understand and agree to abide by the Rules governing the *WorkSafe Saskatchewan* Student Video Contest (as set out in this Official Entry Form) and certify that all information contained in this completed Entry Form is true and accurate. By signing this Entry Form, I irrevocably grant *WorkSafe Saskatchewan* and *Saskatchewan Workers' Compensation Board* the right and permission to: (1) publicly disclose and use my name, address, likeness, school, age, grade and/or prize information for promotional or other purposes, without compensation; and (2) 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 *WorkSafe Saskatchewan* or *Saskatchewan Workers' Compensation Board*, 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 *WorkSafe Saskatchewan* and *Saskatchewan Workers' Compensation Board* 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 *WorkSafe Saskatchewan* and *Saskatchewan Workers' Compensation Board* for any liability and all reasonable costs arising from any third party action, claim or proceeding commenced against *WorkSafe Saskatchewan* because of the Video.

Student Signature (Please complete form & sign before returning to <i>WorkSafe Saskatchewan</i>)	Age	Date
Consent of Parent or Gaurdian (required if student signing above is under 18 years of age)		
I, the parent or guardian of the above named minor, agree that s/he may participate in the <i>WorkSafe Saskatchewan</i> Student Video Contest and, by signing below, hereby voluntarily join in the foregoing Consent and Release		
Name (print name)	Signature	Date
Your personal information is collected under the authority of the Government of Saskatchewan and the Freedom of Information and Protection of Privacy Act for the purpose of the <i>WorkSafe Saskatchewan</i> Student Video Contest. Questions regarding the collection, disclosure and use of your personal information may be directed to Tim Kalynchuk at tkalynchuk@wcbask.com		

8 All entries must be received no later than Friday, February 19, 2010 at 4:00 pm