

Education Voters Video Contest Entry Form

Full Name:

Email:

Check to receive updates:

Phone:

Street Address:

Street Address 2:

City:

State:

Zip:

YouTube URL:

How Did You Hear About The Contest?

What school/organization are you involved with?

Do You Agree To [Rules](#)?

Age:

Parent/Guardian Full Name (if under 18):

Parent/Guardian Email:

Parent/Guardian Phone:

Signature:

Parent/Guardian Signature (if under 18):

EVI maintains the right to use all videos submitted in perpetuity. Because we will have the right to use winning videos, we have to make sure everyone appearing in them gave their consent by signing waivers.

* **Please sign and fax the form to the attention of:**

Ian Moran

Fax: 215-564-2296

OR scan and email to

videocontest@educationvoterspa.org