

Beneath the Surface Art Contest Consent Form

This consent form must be completed by individuals who have submitted an entry to the contest. An additional copy **must** be printed and signed by individuals who appear in any art entry (i.e. photo) for the contest.

Consent for Participants

I acknowledge and agree that The Brant County Health Unit reserves the right to make the following uses of my project entry:

- a) To produce, reproduce, and make copies of the project entry.
- b) To distribute, exhibit, and disseminate the project entry, including but not limited to, communications, advertising and promotional materials.

I acknowledge and agree that The Brant County Health Unit may use my name in the following manner:

- a) To release my name for the purpose of announcing winners, promoting any media campaign platform
- b) To include my name in any disclaimer pertaining to the submission (Disclaimer: Created by [Student's name(s)] in the "Beneath the Surface" Art Contest sponsored by the Brant County Health Unit.)

I understand that I will not receive any compensation from The Brant County Health Unit.

I give permission for my name to be used by The Brant County Health Unit.

Participant Name: _____

Signature: _____

Parent/Guardian Name: _____

(For students under the age of 18, parental consent/signature is also required)

Parent/Guardian Signature: _____