

Official Entry Form School Choice Ohio's Ohio Loves School Choice Video Contest

Student (Entrant) Name:	
Student Email (Please, only provide the s	tudent's email if student is age 18 or over.):
Student's School/Academic Setting:	
Grade Level:	
Title of Video:	
YouTube URL (where video can be found):	
All information for parent/guardian is r	required for students under age 18.
Name of Parent/Guardian:	
Address:	
City:	Zip Code:
Telephone:	Email:

Your name and contact information will be used for contest-related purposes only. School Choice Ohio will maintain appropriate safeguards to ensure the security, integrity and privacy of your personal data.



Student/Guardian disclaimer:

I have read, understand, and agree to all of the Official Co	ntest Rules.	
ENTRANT NAME:		
ENTRANT SIGNATURE:	DATE:	
A minor (for these purposes, a person under 18 years of age) submitting an entry must receive his/her parent/legal guardian's permission and include his/her parent's/legal guardian's signature, name, and a contact information.		
PARENT/GUARDIAN NAME:		
PARENT/GUARDIAN SIGNATURE:	DATE:	