

**OFFICIAL EASTER SPIRIT VIDEO CONTEST
SUBMISSION FORM**

Group Name: _____

Group Contact: _____
(A legal adult over the age of 18) Last name, First name

Contact's address: _____
Street number street name

City Province Postal Code

Phone number Home Other

email

Name of all group participants:
(If all names do not fit below please attach, or use back of form)

I, a legal adult over the age of 18, have fully read and agree to the rules and regulations on behalf of the above members.

Signature

Date

Print name

Title