

**5th Annual Choose Respect Montgomery
Healthy Teen Dating Public Service Announcement Contest**

**Sponsored by the
Montgomery County Domestic Violence Coordinating Council and
Verizon Wireless
in Recognition of National Teen Dating Violence Awareness and Prevention Month
February 2014**



Contest Rules

Project Description: This contest challenges teens to create an original video Public Service Announcement (“PSA”) to promote dating abuse awareness among teens. Students will be eligible to receive Student Service Learning hours for their participation.

Topics for PSA: Each PSA should be directed to teens and focus on Teen Dating Violence. Information about a local resource or national helpline must also be included in the PSA. Some possible PSA themes include:

- Recognizing the warning signs of an abusive relationship (control, isolation, criticism and manipulation)
- Dating abuse carried out through technology
- Helping an abused friend
- Standing up to an abusive friend

Eligibility: The PSA contest is open to all 6th through 12th grade students attending school in Montgomery County. Participants may submit entries created during a school production class, as well as independent productions created outside of school.

Entry Rules: PSA submissions must be a video production in either English or Spanish. The PSA must be 55-65 seconds in length and have a title. Entries that do not comply with the time requirement will be disqualified. All submissions must be original and directed to teens. Video entries must be submitted in DVD format and must play in a DVD player. Each submission group must identify a student production leader to be listed on the application as the primary contact person. However, all participants must be named on the application and complete a separate release form. Please note rules are subject to change.

PSA evaluation: Three finalists will be selected by a panel of peers and domestic violence professionals. Finalists include the student production leader and all those who participated in the selected PSAs. Winners will be announced and receive recognition at a Choose Respect Montgomery event.

Awards: Verizon Wireless will award cash prizes to winners in the following amounts: **1st place \$1000.00, 2nd place \$750.00 and 3rd place \$500.00.** Winners will also receive recognition for their school or youth organization and their PSAs will be submitted for local broadcast.

Contest Limitations: Students may only participate in the production of 1 PSA. Every student involved in the creation of the PSA must sign the consent release form along with their parent/legal guardian. PSAs can not include copyrighted material, such as music (original music is accepted), excerpts from movies, television and/or music videos; profane language; weapons or portray extreme violence; pornographic or other obscene, illegal or racially or otherwise morally offensive material; and/or mention any commercial merchandise or have actors displaying clothing with an insignia.

**Video Submission, Completed Entry Form, AND all Release Forms Must be Received by
Friday, January 17, 2014.**

Please submit the entry to:

**The Domestic Violence Coordinating Council
c/o The Family Justice Center
600 Jefferson Plaza, Suite 500 Rockville, MD 20852
For more information call 240 777-5573**

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Contest Entry Form

SUBMISSIONS WITHOUT COMPLETE FORMS WILL BE DISQUALIFIED

Please write legibly and provide a the correct spelling of all names

Full Name of Production Leader: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Email: _____

PSA Title: _____

PSA Topic: _____

Participants' Names: (Please print clearly and include the names of ALL cast and crew members. Each participant must sign the contest release form. Participants under 18 must also have parental consent.)

Name of School or Youth Organization: _____

Address: _____

Phone Number: _____

Teacher/ Advisor's Name : _____

Teacher/ Advisor's Contact Information:

Phone: _____ Email: _____

Media Consent Statement: to be completed by teacher or advisor:

Sometimes members of the press are interested in contacting the winners of this contest. Please check and initial one of the following: Yes, I agree to have my name and contact information released to the press.

No, I do not want my name and contact information released to the press.

Deadline for Submission – Friday, January 17, 2014

Please submit the entry to:

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600 Jefferson Plaza, Suite 500 Rockville, MD 20852**

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PSA RELEASE AND CONSENT FORM

Please write legibly and provide correct spelling of name

PARTICIPANT'S NAME: _____ Grade Level: _____

SUBMISSION TITLE: _____

I agree that for the opportunity to participate in the Montgomery County Domestic Violence Coordinating Council ("DVCC) Public Service Announcement ("PSA") Contest, my PSA submission may be broadcast and distributed without limitation through any means and I shall not receive any compensation for my submission and my participation in the contest. All material submitted to the DVCC become the property of the DVCC and will not be returned. By submitting this PSA, I grant the DVCC an irrevocable, royalty-free right in this PSA submission to use, publish, and otherwise alter in any way the DVCC deems appropriate. I also agree that should it become necessary, I will sign any necessary documentation to effectuate that right and release to the DVCC.

I confirm that any and all material furnished by me for this program is either my own or otherwise authorized for such use without obligation to me or any third party. I also agree to the use of my name, likeness, portrait or pictures, voice and biographical material about me for educational, program or series publicity and organizational promotional purposes.

I further agree that my participation in the program and my PSA submission confers upon me no rights to use, ownership or copyright. I release the DVCC, its employees, agents, and assigns from all liability which may arise from any and/or all claims by me or any third party in connection with my participation in the program and my PSA submission.

It is understood that the DVCC is under no obligation to broadcast the PSA submission. By signing below, I certify that I am at least eighteen (18) years of age and I have read this Release and agree to all of its terms.

Participant's Name (please print) _____

Participant's Signature _____ Date _____

Street Address _____ City _____ State _____ Zip Code _____

If you are under eighteen (18) years of age, your parent or legal guardian must sign below.

I, _____ certify that I am the parent or legal guardian of the above-named minor and on behalf of him/her, as well as myself, I have read this Release and agree to all of its terms.

Parent/Legal Guardian's Name (please print) _____ Date _____

Parent/Legal Guardian's Signature _____