



Georgia Poison Center



Grady Health System ▪ 80 Jesse Hill Jr. Drive, SE ▪ Box 26066 ▪ Atlanta, GA 30303-3050 ▪ www.georgiapoisoncenter.org
POISON HELP: 1.800.222.1222 ▪ ADMINISTRATION: 404.616.9237 ▪ FAX: 404.616.6657 ▪ EDUCATION: 404.616.9235

VIDEO PSA GUIDELINES

1. This contest is open to students in middle school and high school, only. Only one entry per student/group is allowed.
2. Video PSA should accurately advise on proper poison prevention and references the poison help number, 1-800-222-1222. Medicine overdose, household hazards, food poisoning, and accidental poison ingestion are all examples of poison prevention topics.
3. Video PSA should be 30-60 seconds or shorter (maximum file size of 128MB)
4. Video PSA **should not include** commercial/cartoon characters (examples: Dora the Explorer or SpongeBob Square Pants). State or regional logos or symbols (Mr. Yuk), trademark symbols and company or product names (Clorox, Tylenol, Motrin) are not allowed.
5. Foul language, lewd and lascivious gestures, and unsightly gore will disqualify a video from consideration.
6. Videos must be original and created by the student(s), not his or her parents, teachers, or other adults.
7. Please submit your video to <https://www.georgiapoisoncenter.org/education/poison-prevention-poster-video-contest/>
8. An Entry/Release Form must be submitted for each student involved in the video.
9. Only 1 student from the winning video will be recognized during the Georgia Poison Center December staff meeting on Thursday evening, December 12. Please designate this person on your entry form. All students in the winning video will receive an award.

To submit your video PSA contest entries, please do the following:

Upload your video and all Entry/Release Forms to:

<https://www.georgiapoisoncenter.org/education/poison-prevention-poster-video-contest/>

October 18, 2019 by 5:00pm is the deadline for receipt of the video



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VIDEO PSA ENTRY/RELEASE FORM

August 2019

Student Information

Name: _____

Age: _____

Grade: _____

Complete Home Address: _____

Artwork Title: _____

This video is original and was created by me and my group member (please sign): _____

Designated Student/Teacher to Accept Award (if picked as a winner): _____

Group Members: _____

Teacher Information

Name: _____

Email: _____

Phone Number: _____

Name of School: _____

Complete School Address: _____

Parent or Guardian Information

Name: _____

Email: _____

Phone Number: _____

Release

FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning video PSA, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the video.

I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their video PSA and understand that it will become the property of the Georgia Poison Center.

I hereby warrant that I am of full age and have every right to contract for the minor in the above regard.

Parent or Guardian Signature: _____

Date: _____

Please upload this form with your video PSA submission.

Video PSA entries should be uploaded to:

<https://www.georgiapoisoncenter.org/education/poison-prevention-poster-video-contest/>

Video PSA contest entries must be received by October 26, 2018.

Complete video PSA guidelines are available here:

If you have any questions please contact the Georgia Poison Center Education Department at 404-616-9235.