

ENTRY FORM

(complete one per video submission)

Student Name(s)	1
Please list all students involved #1 will be used for all correspondence	2 3 4
Student #1 email	
Student #1 Mob	
Name of University	
Lecturer Name Contact email	
Please list your key messages	* * * * *

I (we) hereby consent to the use of this video by all ADN and associated **'Word Voice Day'** social media channels, and in Corporate Submissions where appropriate. (tick)

I (we) have read the #ELEVATE Competition Terms & Conditions as outlined on the ADN website and agree to abide by them. (tick)

Signed:

#1 _____ #2 _____

#3 _____ #4 _____

Date: _____