

2024 Illinois High School Radon Video Contest Entry Form (Example Form)

Submission Information (Please Write Clearly or Type): Title of Video Radon in the Home YouTube Username used for Video Submitted: TheRadonGroup Link to YouTube Video (make sure it works): www.youtube.com/linkforradon How many people will participate in your video: 3 Teacher/High School Information: High School Name: Townsville High School High School Address: 1234 School Street City: _____ Zip: ____ 12345 Phone: ____(123) - 456 - 7890 School Contact/Teacher Name: _____ Mrs. Weltcher Contact Email Address: LWeltcher@email.com Contact Phone: (987) - 654 - 3210 <u>List of ALL Participants (including non-students):</u> Participant 1 Information: Student 🗸 Non-Student 🗔 Full Name: Mike Smith Birthday: 1/11/08 Age: 14 Address: 1234 Elm Street City: _____ Zip: 12345 Phone: (123) - 456 -7890 Email: MSmith12345@email.com Participant 2 Information: Student / Non-Student Full Name: Jessica Brandison Birthday: 1/11/08 Age: 14 Address: 1234 Elm Street City: _____ Zip: 12345 Phone: (123) - 456 - 7890 Email: JBrandison12345@email.com Participant 3 Information: Student ✓ Non-Student ☐ Full Name: _____ Amy Martinez Birthday: 1/11/08 Age: 14 1234 Elm Street Address: City: _____ Zip: 12345

Phone: (123) - 456 - 7890 Email: AMartinez12345@email.com

Participant 4 Informat	i on: Student	Non-Student	
Full Name:		Birthday:	Age:
Address:			
City:			
Phone:	Email:		
Participant 5 Informat	ion: Student	Non-Student	
Full Name:		Birthday:	Age:
Address:			
City:			
Phone:	Email:		
Participant 6 Informat	ion: Student	Non-Student	
Full Name:		Birthday:	Age:
Address:			
City:			
Phone:	Email:		

Note: **All participants** listed must submit a release form. If additional lines are needed, please use the back of this form.

Please Email form to: VideoContest@lung.org, OR

Mail form to:

American Lung Association Attn: IL Radon Video Contest 3000 Kelly Lane Springfield, IL 62711



