



**Parental Consent Form
Be On Landing Video Contest**

Entrant's Full Name: _____

Date of Birth (DD/MM/YY): _____

CONTACT INFORMATION

Address: _____

City: _____ Province: _____

Postal Code: _____

Phone Number: _____

Email Address: _____

I consent to my child's participation in LandingTV.ca's Be on Landing Video Contest. I am aware that my child's submission becomes the property of LandingTV.ca and may be used as outlined in the official CONTEST RULES AND REGULATIONS on LandingTV.ca.

I have read and agree to the CONTEST RULES AND REGULATIONS.
I have read this Consent Form and understand and accept its terms.

Parent/Guardian Signature: _____

Parent/Guardian Name: _____

Date: _____

Please send completed form to:

Mail: 616-10th Street East, Saskatoon SK, S7H 0G9

Fax: 306-652-9339

Email: hello@hulo.ca