Enter your FFA Chapter in the Central States Center for Agricultural Safety and Health (CS-CASH) 5th Annual Ag Safety Video Contest

- Each year a significant number of young people are killed, injured or permanently disabled on farms and ranches. Of the fatalities, 23% involved machinery (including tractors) & 19% involved motor vehicles (including ATVs).
- In 2014, there were an estimated 93,700 emergency room visits related to ATV injuries, with 26% of injuries involving youth younger than 16 years of age.
- Rollovers are the single deadliest type of injury incident on the farm. Since 2012, there has been approximately 167 Tractor fatalities in the Central States. (MN 32; NE 16; IA 38; KS 20; ND 11; SD 3; MO 47)
- Recognizing the hazards & using safety solutions can prevent accidents and injury on the farm and ranch.
- INJURIES AND FATALITIES CAN BE PREVENTED!

Put those smart phones and video cameras to good use - create a 60 second video on safety practices and proper machinery or vehicle use. You may win a cash prize and personal protective equipment for everyone in your FFA.

1st place winner receives $1,000 for their FFA Chapter
2nd place winner receives $500 for their FFA Chapter
3rd place winner receives $250 for their FFA Chapter
4th place winner receives $100 for their FFA Chapter
Every participant will receive personal protective equipment!

Contest Rules
1. Only FFA students may participate. All students must have written approval from their FFA advisor prior to participating in this contest. Students under 18 must have written permission from a parent/guardian.
2. Videos must be no longer than 60 seconds and address the topic: Preventing Vehicle & Machinery Incidents
3. Videos must be appropriate for audiences of all ages. Never put yourself or others in dangerous situations during filming. CS-CASH reserves the right to exclude videos deemed inappropriate.
4. Video file, submission form, and media release form must be submitted or postmarked by: Friday, January 12, 2018.
   Email: Ellen.duyesen@unmc.edu
   Postal mail: Ellen Duyesen—COPH 984388 Nebraska Medical Center, Omaha, NE 68198-4388
5. Submitted videos will be posted on CS-CASH YouTube channel. Get your friends, family, and community to watch. The top 4 most viewed videos before 11:59 pm on Friday, March 30, 2018 will be the cash prize winners. Winners will be notified via email.
6. By submitting a video, you grant CS-CASH a royalty-free license to copy, distribute, modify, display publicly and otherwise use, and authorize others to use, your video for any educational purpose throughout the world and in any media.

Be SAFE, Be Creative, Have Fun!
Helpful Links & E-Resources

- Central States Center for Ag Safety and Health: https://www.unmc.edu/publichealth/cscash/

- National Ag Safety Database: http://nasdonline.org/browse.php

- U.S. Ag Safety and Health Centers YouTube Channel: https://www.youtube.com/user/USagCenters

- AgrAbility: http://www.agrability.org

Central States Center for Agricultural Safety and Health (CS-CASH)  
FFA Agricultural Safety and Health Video Contest Entry Form  
(one entry form per video)

Name of School, City and State: ____________________________

Full Name of FFA Leader: ____________________________

Email: ____________________________

Phone: ____________________________

Street Address: ____________________________

City: ____________________________

State: __________________ Zip: __________________

VIDEO TITLE: ________________________________________________

Full names of all FFA members who participated in making the video

How Did You Hear About The Contest? ____________________________

Do You Agree To Rules?  Yes  No

Signature of FFA Leader: ____________________________

Parent/Guardian Signature (for each student shown in the video who is under 18 years of age): ____________________________

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Email to: ellen.duysen@unmc.edu

Postal mail to:  
Ellen Duysen COPH  
984388 Nebraska Medical Center,  
Omaha, NE 68198-4388
MEDIA AUTHORIZATION FORM

Name: ____________________________
Address: ____________________________ City: ____________________________ State: _______ Zip: _________

Description of Information to be released:
Photos and videotape images that will be used in educational materials to promote Agricultural Safety and Health Practices.

Reporter/Affiliation: Central States Center for Agricultural Safety and Health - UNMC College of Public Health
Possible air/publication date: No end date

Consent to: ☐ interview ☒ photography ☒ videotape ☐ other

In the interest of education and advancement of the health sciences, I, the undersigned, voluntarily authorize The Nebraska Medical Center/University of Nebraska Medical Center (Hospital/UNMC) and its employees and agents to take photographs, produce newspaper or magazine articles, television programs, videotape recordings, internet materials and other visual and/or audio recordings in which I may be included in whole or in part for showing to the general public for publicity and promotion. I have had the opportunity to ask questions about the potential uses of the interview/photograph/videotape or other audiovisual.

☐ I consent to having my name identified with the materials. ☐ I prefer not to be identified by name.

I grant this authorization and give my consent as a voluntary contribution to the advancement of medical and other health sciences and education. Therefore, I waive the following: (1) any proprietary rights in the materials, and (2) any rights I may have to inspect or approve the finished materials prior to publication.

I understand that the entities that receive the information may not be covered by federal privacy regulations, and that the information described above may be used again by the recipient.

I understand that Hospital/UNMC ☐ will/☒ will not receive compensation for its use/disclosure of the information.

I understand that I may refuse to sign this authorization and that my refusal will not affect my ability to obtain treatment (if applicable).

I understand that I may withdraw this authorization in writing at any time by notifying Ellen Duysen/402-552-3394 (staff name/phone)

I understand that Hospital/UNMC may not be able to honor my request to withdraw this authorization if the information has already been released.

I release The Nebraska Medical Center/University of Nebraska Medical Center and its employees and agents from any claims arising from the use of such materials.

_______________________________________________ _____________________________
Signature of Individual Signature of parent, guardian, or authorized Representative

_______________________________________________ _____________________________
Date Relationship of above person to individual

_______________________________________________
Witness