

HUDSON COUNTY SHOUTS DOWN DRUGS **PARTICIPANT INFORMATION APPLICATION**

All entries ***MUST*** include the following items **FULLY COMPLETED**

1. Copyright License and Release for each participant
2. Typed lyrics including song title
3. Recorded music with lyrics provided on a CD labeled
4. Recorded music without lyrics (instrumental) provided on a CD labeled

I understand the Hudson County Shouts Down Drugs music competition is a countywide music and drug prevention initiative sponsored by the Partnership for a Drug-Free New Jersey and United Way of Hudson County. I have read, fully understand and agree to the Contest Rules. The music and lyrics submitted are completely original and are written by myself or members of my group with no copyright violations. If chosen as the 1st place winner, I agree to participate in the countywide concert held at the Newport Centre Mall in Jersey City, New Jersey (date TBD). I also agree that if I am chosen as the 1st place winner, I will work with PDFNJ and United Way of Hudson County to meet the terms of the prize that I am awarded.

Hudson County High School Name: _____

High School Mailing Street Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Telephone #: _____

Contact E-mail: _____

Participant or Group Name: _____ Song Title: _____

*Individual Participant must **print** and **sign** their name and grade in Group below:*

_____	_____	_____
Print Individual Participant Name	Signature	Grade
_____	_____	_____
Print Individual Participant Name	Signature	Grade
_____	_____	_____
Print Individual Participant Name	Signature	Grade
_____	_____	_____
Print Individual Participant Name	Signature	Grade
_____	_____	_____
Print Individual Participant Name	Signature	Grade

If your group has more than 5 members, please complete an additional form for individual participant name.

