

The Colonel Douglas H. Gunter History Awards Application Form

(Please fill this form on the computer, print, and sign)

Student: Ms. _____
Mr. _____

Home address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (home): _____ Email address: _____

School: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (school): _____ Web: _____

Principal: Ms. _____
Mrs. _____
Mr. _____

Category of application (check only one):

Text

Visual art

Audio or Video Production

Please read carefully: I certify that the enclosed work is solely my own and that I have read and agree to the Award conditions stated above. I agree to accept the decision of the committee members as final. I further agree that the Canadian War Museum and/or its designated agents may use my name for the purpose of publicizing The Canadian War Museum History Award, also without restriction.

I understand that I retain full ownership and copyright in my submission, and grant to the CWM and its affiliate, the CMH, a royalty-free, world-wide, non-exclusive, perpetual license to publicly display, distribute, reproduce, translate and create derivative works of the submission, in whole or in part, in all media now known or later developed for the purposes of the CWM and CMH, including but not limited to, promotion, advertising, exhibition, web use and publications.

I warrant and represent that the submission is my original work and does not infringe upon the copyrights, trademarks, rights of privacy, publicity or other intellectual property or other rights of any person or entity. I further guarantee to indemnify and hold harmless the CWM and the CMH against any action or claims taken in consequence of any alleged infringement of any copyright or moral right in the work.

Student's signature: _____ Date: _____

Principal's signature: _____ Date: _____

For internal use

Date of reception:	N°:	Fin.:	Rk:
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