



**Speak Out to Save Lives!
Public Service Awareness
Video Contest
2019-2020 School Year**

FBI Pittsburgh H.O.P.E.

(Heroin Outreach Prevention and Education) Initiative

TEAM REGISTRATION FORM

High School Name: _____

High School City/County: _____

Team Name: _____

Team Captain: _____

Teacher Sponsor Name: _____

Teacher Sponsor Contact Phone: _____

Teacher Sponsor Contact Email: _____

Individual Team Member Names (3-5 members max): _____

**Teacher Sponsor and Student Team Members have read and understand the
Official Rules and Regulations corresponding to this contest and agree to
comply with said rules and regulations.**

Teacher Sponsor Signature: _____