

**American Humane HERO VETERINARIAN AND  
HERO VETERINARY NURSE AWARDS™**

**Official Contest Entry and Release Form**

This Contest Entry and Release Form (“**Release**”) **MUST** be completed and signed to enter. By submitting this Release, you acknowledge that you have read, or have had read to you, understand and agree to comply with all terms and conditions contained in the **2022 American Humane HERO VETERINARIAN and VETERINARY NURSE AWARDS™ Contest Official Rules** (the “Official Rules”). All Release forms must be (1) submitted online at [www.herovetawards.org](http://www.herovetawards.org) (or such other website designated by Sponsor) OR (2) sent by Mail to the address at the bottom of this Form. Mailed Entries must be postmarked on or before May 19, 2022 and received by no later than May 26, 2022. Capitalized terms used but not defined herein have the meanings set forth in the Official Rules.

**Entry Categories:** (check one Category box)

**Veterinarian** — Holds DVM or comparable degree from an accredited college/school of veterinary medicine and is licensed with his/her state’s licensing board for veterinarian medicine. The license must be in good standing unless retired.

**Veterinary Nurse** — Also known as a veterinary technician. A credentialed veterinary technician/nurse who has graduated from a program accredited by the American Veterinary Medical Association (AVMA), is licensed, certified or registered in good standing as a veterinary technician/nurse (if required by state), and/or otherwise legally practices as a veterinary technician/nurse as that term is defined by the National Association of Veterinary Technicians in America. Nominees can be retired. In states that do not require a license, a confirmation letter may be requested from the nominee’s supervisor, confirming eligibility and good standing. **Individuals working as a veterinary assistant or receptionist do not qualify.**

**Nominee will be subject to disqualification if she/he does not meet the above criteria.**

**Entrant’s Name if other than the Nominee** (please print): \_\_\_\_\_

Entrant over 18 years of age: \_\_\_\_\_ (yes or no)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**Nominee’s Name** (please print): \_\_\_\_\_

Veterinary Hospital/Clinic: \_\_\_\_\_

Work Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address\*: \_\_\_\_\_

\*Please confirm email address for veterinarian/vet nurse or their office email address before submitting. Nominee email address is required to confirm eligibility with the nominated party.

**Official Narrative Description:**

In at least one-hundred fifty (150) words but no more than five-hundred (500) words, please tell the Sponsor about the Veterinarian or Veterinary Technician/Nurse and explain why the Veterinarian or Veterinary Technician/Nurse deserves the title of American Hero Veterinarian or Veterinary Technician/Nurse. Voting is based on the story you provide and can only be changed once submitted at Sponsor's discretion. Narrative descriptions must be at least one-hundred fifty (150) words to be considered for Nomination.

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I understand and agree that submission of this Release Form grants Sponsor and its affiliates, parents, subsidiaries, sales representatives, agents, advertising, marketing and promotion agencies, merchandising partners, consultants, contractors, and each of their respective officers, directors, shareholders, employees, agents and representatives, and each of these companies' and individuals' respective successors, representatives, and assigns and anyone authorized by any of them, the right to use of my Entry materials (including but not limited to my name, city, state, and narrative) and any other materials I provide (or otherwise connected with the story of my Entry) and any derivations of the foregoing, and grants Sponsor and its agents the rights to publish, use, adapt, edit, modify and/or create derivative works of the elements of such Entry materials in any way, for programming, advertising, trade, commerce, publicity, promotional and other purposes in any and all media, now or hereafter known, worldwide and on the Internet, and in perpetuity, without compensation (unless prohibited by law) or additional consents from me or any third party and without prior notice, approval or inspection, whether or not such Entry is a Finalist or Category Winner.

I further understand that in the event my Contest Entry is declared a Finalist, the Nominee must execute and deliver an Affidavit of Eligibility and Release of Liability/Publicity (publicity portion where legal) and Photograph as required by the Official Rules of the Contest or the Entry may be disqualified in Sponsor's sole discretion and an alternative Finalist selected.

I understand and agree that certain personal information may be provided as a part of the Contest Entry materials, and I confirm that I approve the use, publication and distribution of this personal information in accordance with the Official Rules of the Contest. I am over eighteen (18) years of age and a legal resident of one of the fifty (50) United States or the District of Columbia.

**Entrant's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

How did you learn about the **American Humane HERO VETERINARIAN/VETERINARY NURSE AWARDS™ Contest**? (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Animal shelter/organization<br>_____                                       | <input type="checkbox"/> American Humane Facebook  |
| <input type="checkbox"/> Friend/Co-worker   | <input type="checkbox"/> American Humane Twitter   |
| <input type="checkbox"/> <a href="http://www.americanhumane.org">www.americanhumane.org</a> website | <input type="checkbox"/> American Humane Instagram |
| <input type="checkbox"/> Internet search  | <input type="checkbox"/> Magazine or Newspaper     |
| <input type="checkbox"/> American Humane email  | <input type="checkbox"/> Other: _____              |

Optional:  **Yes**, I would like to donate to American Humane.

My check in the amount of \$ \_\_\_\_\_ is enclosed; or charge my credit card number:

Name on Card: \_\_\_\_\_ Type of Card \_\_\_\_\_

Card Number: \_\_\_\_\_ Security Code \_\_\_\_\_

Signature: \_\_\_\_\_

Optional:  **Yes**, I would like to receive American Humane authorized communications and I consent to American Humane's privacy policy: <http://www.americanhumane.org/about-us/privacy-policy.html>

Mail This Contest Entry and Release Form to:

American Humane  
Attn: Entry  
American Humane HERO VETERINARIAN/VETERINARY NURSE AWARDS™ Contest  
1400 16<sup>th</sup> Street NW, Suite 360, Washington, DC 20036

**Entries submitted by mail must be postmarked on or before May 16, 2022 and received by American Humane no later than May 26, 2022 to be eligible.**