

## ENTRY FORM

The undersigned (name and su	rname of Director or Referent)
Address	City
e-mail	phone number
Mobile	
intends to take part in the <b>Soci</b> following work:	al Film Festival ArTelesia – School and University Competition with the
Title of the film / short film	
in one of the following section	s (put a tick)
- SCUOLA D'INFANZIA - SCUOLA PRIMARIA E SI - SCUOLA SECONDARIA - UNIVERSITA'	ECONDARIA DI I GRADO DI II GRADO
with one of the following them	nes (put a tick)
safeguard the eco-system - INTEGRATION: respect f - CINELIBRIAMOCI: work - FREE THEME	ENT AND SUSTAINABILITY: works inspired by the need to protect and or ethnic and cultural identity against all forms of discrimination s inspired by works of Italian and world literature
Country of production	Year
Duration	Direction
Cast	
Kind	
Language	
Subtitles	
Original format	
SHORT SYNOPSIS:	



## SHORT BIO-FILMOGRAPHY OF THE DIRECTOR

How did you find out about the competition?	
from the website www.socialfilmfestivalartelesia.it yes no	
from Internet yes no	
Industry magazines other, specify:	
The undersigned	
declares	
to be (choose among Director/Producer/Referent) of the work (title)	

## and to have full and exclusive legal rights

**Declares** that his film does not affect the rights of third parties, as expressed by Law 633/1941 and subsequent amendments (copyright); and does not contain defamatory content

Declare that he has read and therefore fully accepts all the Competition Rules.

Accept that all the material sent will become part of the "Festival Archive".

Authorizes the public screening without any compensation for his film.

The undersigned authorizes the processing of personal data in accordance with the provisions of the sector legislation. Declares to be aware of criminal penalties in the case of false declarations; The winners commit themselves to indicate in the headlines of their film the name and logo of the Social Film Festival ArTelesia, together with the Award received.

The audiovisuals in HD format (high definition) must be sent by uploading them on an internet platform (preferably Vimeo) and sending the link to the following e-mail address: <u>sffaed13@gmail.com</u> with the following wording in the subject of the e-mail: "Section - Title of the work". It is advisable to keep the vision private and to indicate the access password. In the aforementioned e-mail you must attach the registration form completed in its entirety and duly signed by the referent, by the author of the work or by the director. The undersigned expressly authorizes the screening of his work in all the events promoted by the Festival.

For further informations write to: sffaed13@gmail.com or contact the following numbers:

+ 39 **320 35 41 913** + 39 **393 21 02 565** 

Place and date: