

ENTRY FORM

The undersigned (name and su	irname of Director or Ref	Terent)	
Address	City		
e-mail		phone number	
Mobile			
intends to take part in the Soc i work:	ial Film Festival ArTele	sia – WORD PREMIERE Competitic	n with the following
Title of the film / short film			
Country of production		Year	
Duration	Direction		
Production			
Kind			
Screenplay			
Set			
Costumes			
Film photography			
Editing			
Original soundtrack			
Sound			
Cast			
Language			
Subtitles			
Original format			
Production			
Distribution			



SHORT SYNOPSIS:

SHORT BIO-FILMOGRAPHY OF THE DIRECTOR

How did you find out about the competition?			
from the website www.socialfilmfestivalartelesia.it			
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: _____

Referent's signature_____