



PHONEY FILM FESTIVAL

Entry Form



Contact Details

Full name of entrant/s:

Age/s:

Email address:

Telephone:

Film title:

Photographic/ Image Consent

I give permission for me/my child's image to be used by Council publications (i.e. Annual Reports, website, news stories, promotions etc.) and media

Please tick: Yes No

**Indicating 'NO' will not exclude people from the program, but may mean that they will be left off group shots etc which may be used for promotional purposes.*

Disclaimer

- I hereby give consent for me/my child (as specified above) to enter the Phoney Film Festival.
- I give permission for any part of my/my child's Phoney Film Festival film to be screened at any of the Phoney Film Festival screening events or used for other promotional purposes.
- I/my child understand that Phoney Film Festival (or its organisers) cannot be held responsible for my/my child's own actions during or in relation to the event or competition.
- I have read and understood the conditions of submission for the film festival.

Name of Parent/ Guardian: _____

***If participant is 18 years or older they may sign for themselves**

Signature: _____

Date: _____