

Pocket Perspectives

YOUTH SMARTPHONE FILM COMPETITION.

ENTRY & VIDEO RELEASE FORM

*Please enter **your details below.***

This is a fillable PDF, enter your details where appropriate. Print and sign whenever asked, scan and send it to **aliddy@iellen.org.au**

YOUR DETAILS

Your name : _____
Email : _____
Phone : _____
Address : _____

Date of birth (DD/MM/YYYY) : _____ Age : _____

*Please note that this film competition is for young people aged 15 – 18 years only.

FILM DETAILS

Film title : _____
Film description : _____
(140 characters)

Film shot on : _____

(make and model of phone the film was shot on).

Editing software/app used : _____

Is this the first film you have ever made? : Yes No

Upload to : YouTube Vimeo

Film URL (link) : _____

Password to your film (if any) : _____

I accept the Terms and Conditions of entry.

*See **page 3 on the Information Guide** for Terms and Conditions.



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AGREEMENT TO COMPLETE

Please read and **sign the agreement below.**

Permission and agreement checklist:

- I have permission to submit this film to Pocket Perspectives – Youth Smartphone Film Competition facilitated by the Inner Eastern Local Learning and Employment Network (IELLEN).
- I agree that this film may be used by the IELLEN for promotional purposes and public screenings and as part of any outreach educational program for schools, education providers and community service organisations.
- I have obtained permission from everyone appearing in this film to submit it to Pocket Perspectives – Youth Smartphone Film Competition.

I have checked and give my agreement to the above checklist by signing below.
(filmmaker)

Signature : _____ Date (DD/MM/YYYY) : _____

Name : _____

PLEASE FILL IN ONE OF THE BELOW (ADULT SUPPORTING ENTRY)

Parent/guardian supporting this entry.

Parent/guardian name : _____ signature : _____

Parent/guardian phone : _____ email : _____

Teacher/educator supporting this entry.

Teacher/educator name : _____ signature : _____

Teacher/educator phone : _____ email : _____

Staff member from community service organisation supporting this entry.

Staff member name : _____ signature : _____

Staff member phone : _____ email : _____

