



Cinesnaps 2023 Short Film Competition Parental Consent for Production Team YEARS 10-12 SECTION

An individual form must be completed for each participant aged under 18 years

Participant:

Title of Short Film Entry:
Name:..... School:.....
Date of Birth:...../...../..... Age:..... Preferred gender pronouns:
Participants Mobile:.....
Parents/Guardians Name(s):.....
Address:.....Postcode:.....
Home No:..... Work No:..... Mobile:.....
Email:.....

Photographs/Audio Visual:

- YES! I give permission for my child’s photograph to be taken during this activity and acknowledge that this is an authorized use of my child’s image for the purposes of Copyright Act 1968. I understand that images may be used for publicity and promotion by CinefestOZ in local press and other mediums for an undefined period of time. *(Where possible, parents will be contacted in advance of use of any images to confirm permission).*
- NO! I do not give permission.

Permission:

I(the parent/guardian) give permission for..... to participate in the CinefestOZ 2023 Cinesnaps Short Film Competition. I have read and understood the Terms & Conditions of Entry and give permission for my child to participate in this project.

I acknowledge that I am aware that, should my child, listed above, become a finalist and attend the Grand Finale event, content in other student films is unrated and therefore may contain mature content.

Signature:
Name:
Date:

RETURN THIS FORM by FRIDAY 30th June 2023 WITH YOUR FILM ENTRY to the CINEFESTOZ Website:

CINEFEST.COM / FESTIVAL PROGRAM / CINESNAPS SCHOOLS PROGRAM / SHORT FILM COMPETITION / SUBMIT ENTRY!

GEOGRAPHE FRENCH AUSTRALIAN FESTIVALS INC.

Ref: 2020 Cinesnaps Short Film Competition

Attention: Sarahjane Bilston (Community Film & Engagement Officer), PO Box 5185, West Busselton WA 6280

Telephone: 0401 054 672 | Email: cinesnaps@cinefestoz.com | Web: www.cinefestoz.com