

Frame of Mind 2018

Official entry form

A COMPLETE, PRINTED AND SIGNED ENTRY FORM MUST ACCOMPANY EVERY ENTRY.

Please print off, complete and sign this form and send it in with your entry.

Send your DVD to: Annu Mary Joseph, Communications Executive, SCARF India, R/7A, North Main road, Anna Nagar West Extension, Chennai 600101, Tamil Nadu, India.

Filmmaker's details

Name:

Title (e.g. producer, director):

Address:

Town:

State:

Post code:

Daytime telephone:

Mobile telephone:

Email address:

Are you a healthcare professional?

Are you affiliated with any organization?

What is the nature of your affiliation (e.g. volunteer, member, donor)?

Film's details

Title:

Category:

Duration:

Credits

Producer:

Director:

Writer:

Sound recordist:

Editor:

Cinematographer:

Casting:

Narrator:

Declaration

I declare that I am the maker of the film named above and that the film is an original work by me and that I am the owner of all copyrights in it (including sound, artworks, film and music) or have all the necessary permissions.

I further declare that I have obtained all other necessary consents from such persons or owners of locations whose consent may have been needed in making the film or in the use of material contained or reproduced in it and I have complied with all legal requirements in making the film. The film contains no defamatory material and does not breach the privacy, contractual, intellectual property or other rights of any persons. The film may be screened in connection with the contest, conference and at associated programs as deemed fit by the organizers.

Signature

Date: