



ENTRY FORM 2022

(to write in **block letter** and indicate a valid email address)

TITLE			YEAR		DURATION	
CATEGORY	<input type="checkbox"/> CortoFiction International <input type="checkbox"/> CortoFiction Italia <input type="checkbox"/> CortoDoc <input type="checkbox"/> CortoAnimation					
SHOOTING FORMAT	<input type="checkbox"/> 35mm <input type="checkbox"/> 16mm <input type="checkbox"/> HD <input type="checkbox"/> Red One <input type="checkbox"/> DVD <input type="checkbox"/> DV <input type="checkbox"/> MiniDV <input type="checkbox"/> DVCam <input type="checkbox"/> Other _____					
If you used one of these platforms to upload your short movie, please specify which one between:						
<input type="checkbox"/> Click For Festivals <input type="checkbox"/> Film Freeway <input type="checkbox"/> FestHome <input type="checkbox"/> FilmFestivalLife <input type="checkbox"/> ShortFilmDepot						
SELECTION IN ANY OTHER FESTIVALS AND AWARDS WON						
_____ _____ _____						
DIRECTOR	Name _____ Surname _____ Nation _____ Address _____ City _____ Phone _____ E-mail _____					
PRODUCTION	Name _____ Surname _____ Nation _____ Address _____ City _____ Phone _____ E-mail _____					
WEB SITE	<input type="checkbox"/> Director <input type="checkbox"/> Production <input type="checkbox"/> Movie WebSite: _____					
SYNOPSIS	_____ _____ _____ _____					
HOW YOU DISCOVERED "VISIONI CORTE"?	<input type="checkbox"/> Newspapers <input type="checkbox"/> Television <input type="checkbox"/> Radio <input type="checkbox"/> Web <input type="checkbox"/> Social Networks <input type="checkbox"/> Forum <input type="checkbox"/> Friends <input type="checkbox"/> Other Specify below the exact source (for example which newspaper, which television etc.) _____					
Have you taken part to Visioni Corte Film Festival in the previous editions? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If so, which year? _____						
DISCLAIMER	I declare to be the owner of all rights and have the legal responsibility of the above mentioned. I also certify that I have read the notice and to accept it in all its parts. Signature _____					
	I authorize Associazione Culturale "Il Sogno di Ulisse" to the processing of personal data, in accordance with the DL 196 of 30 June 2003 on the protection of privacy. <input type="checkbox"/> I Authorize <input type="checkbox"/> I Don't Authorize					
	I authorize Associazione Culturale "Il Sogno di Ulisse" to use my short movie as specified in paragraph 3.8 of the Call For Entry. <input type="checkbox"/> I Authorize <input type="checkbox"/> I Don't Authorize					
ACCEPTED PAYMENTS METHOD	<input type="checkbox"/> Paypal <input type="checkbox"/> Bank Transfer <input type="checkbox"/> Online Platform (Click For Festivals – Film Freeway – FestHome – Reelport)					

Send to: Visioni Corte Film Festival - Associazione Culturale "Il Sogno di Ulisse"
c/o Gisella Calabrese - Via Luigi Cadorna 147 - 04026 Minturno (LT) - ITALY
or via email to info@visionicorte.it

Please enclose receipt of the entry fee