

Data about work

## August 22-29, 2025 XXIV EDITION

## ENTRY FORM

| Title         |                            |           |                            |
|---------------|----------------------------|-----------|----------------------------|
| Direction     |                            |           |                            |
| Production    |                            |           |                            |
| Address       |                            |           |                            |
| Phone Number  |                            |           | Duration                   |
| Date first    | A                          | wards     |                            |
| projection    |                            |           |                            |
| Type of AI    |                            |           |                            |
| (Specify      |                            |           |                            |
| technologies, |                            |           |                            |
| platform)     |                            |           |                            |
| Awards        |                            |           |                            |
| Attachments   | List of titles             | 🗆 Synopsi | is Photographic material 🗆 |
|               | Backstage/video comments 🗆 |           |                            |

**Does the short film have Italian subtitles already printed on it? Yes**  $\square$  **No** $\square$  **Is this a preview?** Regional (Campania)  $\square$  National (Italy) $\square$  International  $\square$ 

## Data about author

| Name and Surname |               |
|------------------|---------------|
| Address          |               |
| Phone number     | Mobile        |
| E-mail           | Date of birth |
|                  |               |

## You authorize:

**Broadcast of the short film on 105 Tv, partner of the Villammare Festival** The undersigned declares, under his/her sole responsibility, that he/she is the legitimate representative of the work, authorized by all those entitled to it, that what is contained in this application is truthful and authorizes VFF- Gulf of Policastro Association to process his/her personal data in accordance with current legislation.

Date:\_\_\_\_\_

Signature: