

Video Project "DESTINI INCROCIATI" (Edition no. 9)

Venice, Santa Margherita Auditorium –Ca' Foscari University 23rd, 24th, 25th of November 2022

PARTECIPATION PROPOSAL/ FORM

I, the undersigned (given name and surname of the project responsible)
resident in street street number postcode
County/District phone number e-mail e-mail
In the name of the enterprise /institute
REQUIRE TO PARTICIPATE AT THE "DESTINI INCROCIATI" FESTIVAL with the video project:
Title:
ARTWORK DESCRIPTION Production date and location
Title
Author
Producing institution Length
Format
Abstract (text between 1.000 and 2.000 keystrokes, spaces included)
Notes
Date and signature
PRIVACY With this form, I authorize the National Network Theatre in Prison to the computer processing of the necessary personal information in view of the festival, as defined by the D. Lgs. 30.06.2003 n. 196 and following amendments and additions.
Signature



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CONSENT FORM

I, the undersigned (given name and surname of the project responsible)
resident in street street number postcode
County/District phone number e-mail
In the name of the enterprise /institute
I authorize
the usage of the artwork by the Organizing Institution of the festival DESTINI INCROCIATI
Theatre in Prison National Project for divulgation, informative, promotional, and educational
purposes, requiring to specify the name of the author and institution which produced the artwork
Concerning the usage of footage and voices of people in the audio/video document, I declare that I
already have their consent.
I declare - That the artwork provided by me is an original production and does not plagiarize pre-existent artworks, and that its content does not go against current laws concerning the rights of third parties and does not have defamatory intents. - that the artwork soundtrack is original and/or we have absolved obligations concerning copyright and/or Siae.
In any case, I absolve the promoting institution of any civil or penal responsibility, and I assume
any responsibility for the usage of the aforementioned material.
Date and signature
PRIVACY With this form, I authorize the National Network Theatre in Prison to the computer processing of the necessary personal information in view of the festival, as defined by the D. Lgs. 30.06.2003 n. 196 and following amendments and additions.
Signature