

Springforth 2012
Film Festival Entry Form for youth groups
Due April 1, 2012

Name of video: _____ Duration of video: (mm:ss) _____

Youth Group: _____ Grade: _____

Phone number: _____ E-mail: _____

Church: _____ Youth Leader's name: _____

List Participants: _____

Please give a brief background of who you are, and the video you have submitted (this information could be used to help introduce you at the film festival): _____

By Signing below, I indicate that I am/we are the original producer/s of this film, I have gained permission from each participant, and have obtained permission to use copyrighted material. I/we give permission for this film to be used by The Convention of Atlantic Baptist Churches on the internet and in public settings (including but not limited to: speaking engagements, promotion in churches, class and educational settings), and to be shown at Springforth. I am/we are attaching the signatures of film participants and parental consent of each individual under 18.

- By checking this box I have read and understood all the guidelines in the PDF document on the website
- By checking this box I have enclosed all proper documentation for copyrights obtained (if applicable) and have submitted the name, artist and website information where music or sound effects etc have been retrieved from.

Signature of producer

Date

Witness

Date

By signing below, I _____ (pastor) indicate that the information provided on this form is correct and true to the best of my knowledge. I also signify that this film has been a student-led project, and do hereby witness that the signatures provided (students, parents and other participants) are valid and are the true signatures of the persons so noted.

Signature of pastor

Date

**Please e-mail application forms to Ellen Brewer at ellenbrewer@hotmail.com or
Mail all forms to Ellen Brewer C/O Douglas Baptist Church 1012 Hwy 105 Douglas NB E3G 7J4 or
Fax all forms (except application forms) to Jody Linkletter at 1.902.895.1359**

Springforth 2012
Film Festival Consent form

One for each actor needs to be filled out and submitted (with entry form – April 1, 2012)

**Mail forms to Ellen Brewer C/O Douglas Baptist Church 1012 Hwy 105 Douglas NB E3G 7J4 or
Fax to Jody Linkletter at 1.902.895.1359**

Video Title: _____

Participant's Name: _____

I (and my parent or guardian, if I am below 18 years of age) hereby grant permission to the rights of my image, likeness and sounds of my voice as recorded on audio or video tape without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product where my likeness appears. Additionally I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

The video may be used during Springforth and other public settings including but not limited to: internet, speaking engagements, promotion in churches, class and educational settings. By signing this release I understand this permission signifies that the video recording of me may be electronically displayed via the internet or in other public settings. I understand that there is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be used or distributed.

By signing this form I (and my parent or guardian, if I am below 18 years of age) acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

For promotional and other valuable consideration, receipt of which is acknowledged, I (and my parent or guardian, if I am below 18 years of age) hereby authorize, license, and permit Springforth and anyone authorized by them, to use, broadcast, promote license, distribute, lend, display, publish, or post on websites this audio/video recording, and all submitted media or images for any educational, training or promotional purposes, and hereby release Springforth, Convention of Atlantic Baptist Churches, from all liability and claims that I have or may have related to or arising out of the exercise of said authorization, license, and permission.

Name (print): _____

Signature: _____

Complete mailing address: _____

Telephone number: _____ e-mail _____

Date: _____ I am over the age of 18 so no parental consent is required _____

If Participant is under 18 years, I hereby consent on behalf of the student.

Parent/guardian's name: _____

Signature: _____

Complete mailing address: _____

Telephone number: _____ e-mail: _____

Date: _____