Charlie's 2023

Overview

Charlie's is a creative co-working space, networking and events hub, and leading international industry incubator.

It is an intersection point for the Australian film & television community and the US and international screen industries to come together, meet, network, and possibly toss around ideas on how to work together.

Charlie's was created to provide a softer landing for Australians when they first arrived in Los Angeles and to provide ongoing access into Hollywood and to help open doors.

An essential part of AiF's ongoing mission is to provide a safe, creative and supportive community for Australians and our international mates working in Los Angeles. Since the beginning of AiF over 20 years ago, it has been devoted to providing content creators a sense of community and exclusive access to the industry through its screenings and various social and career development programs.

This application is for access to a hotdesk at Charlie's. Organic introductions to other residents and AiF members who pass through the offices are encouraged and facilitated depending on who's scheduled to come in. Charlie's is not able to make direct introductions to managers or agents or studio executives for applicants.

Charlie's will be closed from May 8th to May 13th.

Charlie's 2023

* indicates a required field

Are you eligible to apply?

Are you a Queensland based screen prac ○ Yes		i oner? * No
Are you a full time student? * O No If you answer YES, you may not be eligible to apply	\sim	Yes
Do you have an Australian Business Num ○ Yes	be O	r (ABN)? * No

APPLICANT TYPE

* indicates a required field

Individual or Organisation

Are you applying as an in Individual	dividual or organisation? * ○ Organisation	on
APPLICANT DETAILS		
* indicates a required field		
INDIVIDUAL APPLICAN	Т	
Name * First Name	Last Name	
Business Name (if applica	ible)	
ABN *		
The ABN provided will be use check that you have entered	ed to look up the following informathe ABN correctly.	mation. Click Lookup above to
Information from the Australian	Business Register	
ABN		
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration Tax Concessions		
Main business location		
Main business location		
Registered for GST? ○ Yes	○ No	
Postal Address * Address		
Suburb State Postcode		

Street Address (if different to Address	above)	
Suburb State Postcode		
Contact Email *		
Contact Phone Number *		
ORGANISATION APPLICAN	Т	
Organisation Name *		
ABN *		
The ABN provided will be used to check that you have entered the	look up the following information. ABN correctly.	Click Lookup above to
Information from the Australian Busin	ness Register	
ABN		
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration		
Tax Concessions		
Main business location		
Registered for GST? ○ Yes	○ No	
Postal Address * Address		

First Na	me	Last Na	me	Role	Upload Resume/CV
Travell	ers				
End Dat	e				
			Must be a da	te	
Start Da	ate				
Please p	rovide exp	ected dates	of your planne	ed trip to LA.	
Tell us	about y	our visit t	o LA		
	es a requir				
APPLI(CATION	DETAILS			
Phone N	Number *				
Contact	Email *				
Position	1 *				
i ii se ivaii			3t Nume		
Contact First Nan	Person *		st Name		
Suburb	State	Postcode			
Office A Address	ddress				
Suburb	State	Postcode			

outcomes. Also include what networks you intend to form commissioners, actors, agent expected that practitioners of some preparation and resear who they intend to meet. *	projects you with writers s or any oth hosen to go	intend to produce er organ to Charli	o work on ers, directo isations/ind e's Reside	and what kind of ors, distributors, dividuals. It is ncy will have done
Upload Your Pitch Deck & Syr Attach a file:	nopsis			
DIVERSITY DATA				
* indicates a required field				
Statistical and Diversity D	ata			
Not sure of your electoral region? state.aspx	? Look up you	r address	here : <u>http:/</u>	/www.ecq.qld.gov.au/
Federal electorate for applicant *				
State electorate for applicant *				
Local govt electorate for applicant *				
Please indicate if you identify with any of the following under-represented groups: *	□ Women□ People lived disability□ LGBTQIA□ People from background	+	QLD □ A □ To Peop	ow Socio-economic
Gender of Applicant	○ Female	○ Male	O N	on-Binary O Prefer not to say

DECLARATION

* indicates a required field

Applicant Declaration

- The applicant declares they have read and understood Screen Queensland's funding guidelines and Terms of Trade.
- The applicant agrees and understands that any funding is discretionary and any approvals are subject to funding being available.
- The applicant has the firm intention and is able to proceed with the proposed project and declares that the information provided, together with all attachments are, to the best of the applicant's knowledge and belief, true and correct.
- The applicant undertakes to advise Screen Queensland of any significant changes to the proposed project, the information supplied or the materials submitted regarding the project.
- The applicant warrants that it owns or holds all relevant rights in the original works and or copyright materials necessary to proceed with the proposed project as envisaged by this application and will keep Screen Queensland indemnified against all actions, suits, proceedings, claims or demands made against Screen Queensland by reason of any breach of the above.
- It is agreed that Screen Queensland will not be liable for any action or claim based on any industrial or intellectual property of the applicant arising out, or in connection with Screen Queensland's receipt, custody or consideration of the applicant's submission.
- The applicant acknowledges and agrees that Screen Queensland may download, copy, store and use any material supplied or proffered by the applicant as part of this application and may provide access to such material to nominated third parties (as applicable).
- The applicant acknowledges and agrees that typing their name on this form and submitting the form will constitute signature by electronic communication under the Electronic Transactions (Queensland) Act 2001.

Disclosure of project information:

- You acknowledge and agree that Screen Queensland, in consultation with the applicant, may publish for promotional purposes only, information about your project in Queensland Government media releases, on Screen Queensland's website or in Screen Queensland's e-newsletter. This information may include project name, genre and synopsis, names and past credits of individuals comprising the key creative team.
- You agree to complete a brief written testimonial of your time at Charlie's Lab outlining the meetings, projects and connections you made while there. You also agree to come into the Screen Queensland offices to discuss your time at Charlie's Lab within one month of your return to Queensland.

Authorised Signatory

Name *	First Name	Last Name	
Position *			
Submission Date *			