Form Preview

START YOUR APPLICATION

* indicates a required field

Are you eligible to apply?

<u>SQ Terms of Trade</u>; <u>SQ QPE Definition</u>; <u>SQ Strategic Plan 2023-2025</u>; <u>Screen Diversity and Inclusion Network Charter</u>; <u>Screen Australia Pathways and Protocols</u>.

tet have been Queensland residents for at cation. projects discussed in this application. acters in the project/s that form part of this at screen agency. aming service. pute to credits for a course or study. creen Queensland. n Queensland. n Queensland.). rade; SQ QPE Definition; SQ Strategic Plan work Charter; Screen Australia Pathways and
n l on (07) 3248 0500 / <u>content@screenqld.com.au</u>
l and/or team to be considered for other ition? * > No
isation? * Organisation

AIMC 2024 Applications Form Preview

APPLICANT DETAILS

*	ind	icat	tes	а	req	uire	ed	fiel	d

INDIVIDUAL APPLICAN	Т	
Name * First Name	Last Name	
Business Name (if applica	able)	
ABN * The ABN provided will be use	ed to look up the following inf	ormation. Click Lookup above to
check that you have entered	I the ABN correctly.	·
Information from the Australian ABN	i Business Register	
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		
Suburb State Posterde		
Suburb State Postcode		

Street Address (if different to above)

Address

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Suburb State Postcode		
Contact Email *		
Contact Linan		
Contact Phone Number *		
ORGANISATION APPLICAN	Т	
Organisation Name *		
Full Legal Name		
ABN *		
The ABN provided will be used to	look up the following information.	Click Lookup above to
check that you have entered the	ABN correctly.	•
Information from the Australian Busi	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 CST2		
Registered for GST? O Yes	○ No	
Postal Address *		
Address		
Address		

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Suburb St	tate	Postcode					
Office Add Address	Iress						
Suburb St	tate	Postcode					
Contact Po First Name	erson *		Last Name				
Position *							
Contact E	mail *						
Phone Nui	mber *						
List of Cor	mpany	Directors					
Legal Adv	isor						
Accountar	nt						
Statistica	al Data	a					
			gion? Look up yo s-my-electorate	ur address l	here: <u>https</u>	://www.ecq.q	ld.gov.au/
Federal el applicant		e for					
State elec		for					

Local govt electorate for	
applicant *	

APPLICATION DETAILS

* indicates a required field

Attendees

First Name Last Name	Role	QueenslandUpload CV Resident	Upload Bio	Do you identify with any diverse groups in the Australian screen industry?
		Only Queensland		
		residents are		
		eligible to apply for this		
		funding.		
		O Yes O No		☐ Female identity
				□ Age (55+)
				☐ Aboriginal identity
				☐ Torres Strait Islander identity
				□ Cultural and linguistic diversity
				□ Person with a disability
				□ LGBTQIA+
				☐ Regional or Remote Queenslander (150KM+ from Brisbane or Gold Coast CBD)
				☐ Low socio- economic status
				□ Other:

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Attendand	ce Question	าร						
Please provide a short statement (with a list of credits where appropriate) indicating your track record in creating commercial screen stories *								
	us how this o					wth of your d industry. *		
If applicable, please outline the projects that you will market at the convention, (including the title and log-line):								
Additional	Documen	ts						
If there are a below.	ny additional	documents r	elevant to	your appli	cation, pleas	e upload them		
Description			File	Upload			7	
							<u> </u> 	
							4	

FUNDING SUPPORT

* indicates a required field

Support Provided

If successful, the applicant will receive:

A registration to AIMC 2024 for each successful attendee.

Acquittal

If successful, you will be asked to submit a short report outlining your experience and outcomes from attendance at the event.

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Acknowledgement *

 $\ \square$ I agree that if I am approved, I will complete and submit the required acquittal report to Screen Queensland

DECLARATION

* indicates a required field

Applicant Declaration

- The applicant declares they have read and understood Screen Queensland's Market Program 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 activity and declares that the information provided, together with all attachments are, to the best of the applicant's knowledge and belief, after making all reasonable inquiries, true and correct.
- The applicant undertakes to promptly advise Screen Queensland of any significant changes to the proposed activity, the information supplied or the materials submitted regarding the activity.
- 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 activity 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 agrees that Screen Queensland's liability in relation to the application, the application process and all related matters to the application is limited to \$1. Screen Queensland reserves the right to change any element of the application process and the underlying program at any time, in its absolute discretion.
- 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* (Qld).

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 activity 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.

Privacy Notice and Consent

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- By submitting an application, you agree that we will deal with the personal information you provide in accordance with our Privacy Policy, as amended from time to time, and this Privacy Notice and Consent Form.
- By submitting an application, you agree that your details will be added to our marketing database and that you may receive communications related to Screen Queensland's events, programs and services from time to time. If you do not wish to be added to our marketing base, please click the opt-out check box below.

	I do not wish	to have my	details	added to	the	marketing	database
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Authorised Signatory

Name *	First Name	Last Name
Position *		
	Must be a director (if applying a	s a company).
Submission Date *		