START YOUR APPI ICATION

* indicates a required field

Are you eligible to apply?

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

Eligibility *

□ I and all people applying to attend the market have been Queensland residents for at least 6 consecutive months at the time of application.

□ I am the demonstrated rights holder in the projects discussed in this application.

□ I authentically represent the story and characters in the project/s that form part of this Application.

□ I am not employed by a state or government screen agency.

- □ I am not employed by a broadcaster or streaming service.
- □ I am not a full time student.
- □ None of the projects I am submitting contribute to credits for a course or study.
- □ I do not have any projects in default with Screen Queensland.
- □ I and my team are not in default with Screen Queensland.
- □ I have an Australian Business Number (ABN).

□ I have read and agree to the SQ Terms of Trade; SQ QPE Definition; SQ Strategic Plan 2023-2025; Screen Diversity and Inclusion Network Charter; Screen Australia Pathways and Protocols (linked above).

Eligibility *

- I am eligible to apply for this application
- I am not eligible to apply for this application

If you are unsure, please contact Screen Queensland on (07) 3248 0500 / content@screengld.com.au

Provide further details if necessary

Are you happy for your project/s, proposal and/or team to be considered for other suitable opportunities beyond this application? *

⊖ Yes

○ No

APPLICANT TYPE

* indicates a required field

Individual or Organisation

Are you applying as an individual or organisation? *

○ Individual

○ Organisation

APPLICANT DETAILS

* indicates a required field

INDIVIDUAL APPLICANT

Name *

First Name

Last Name

Business Name (if applicable)

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 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			

Registered for GST?

 \bigcirc Yes

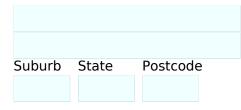
O No

Postal Address * Address

•	 ••••	 -		

Suburb	State	Postcode

Street Address (if different to above) Address



Contact Email *

Contact Phone Number *

ORGANISATION APPLICANT

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 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		

Registered for GST?

 \bigcirc Yes

O No

Postal Address *

Address

AIMC 2024 Applications Form Preview

Suburb	State	Postcode		
Office A Address	ddress			
Suburb	State	Postcode		
Contact First Nan	Person * ne		t Name	
_				
Position	*			
Contact	Email *			
Phone N	lumber *			
List of C	Company	Directors		
Legal A	dvisor			
Account	ant			

Statistical Data

Not sure of your electoral region? Look up your address here: <u>https://www.ecq.qld.gov.au/</u> <u>electoral-boundaries/where-is-my-electorate</u>

Federal electorate for applicant *	
State electorate for applicant *	

Local govt electorate for applicant *

APPLICATION DETAILS

* indicates a required field

Attendees

 		 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

AIMC 2024 Applications Form Preview



Attendance Questions

Please provide a short statement (with a list of credits where appropriate) indicating your track record in creating commercial screen stories *

Please tell us how this opportunity will impact the strategic growth of your business or career, and in doing so the growth of the Queensland industry. *

If applicable, please outline the projects that you will market at the convention, (including the title and log-line):

Additional Documents

If there are any additional documents relevant to your application, please upload them below.

Description	File Upload

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.

Acknowledgement *

□ 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

• By submitting an application, you agree that we will deal with the personal information you provide in accordance with our <u>Privacy Policy</u>, as amended from time to time, and this <u>Privacy Notice and Consent Form</u>.

- 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

Authorised Signatory

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