Sustainable Screens Australia Workshop Form Preview

APPLICATION * indicates a required field INDIVIDUAL APPLICANTS **Queensland Resident *** Yes O No Name * First Name Last Name **Primary Address *** Address Suburb State Postcode Contact Email * **Contact Phone Number * About You** Role * **Upload CV** Attach a file: Do you identify with any diverse groups that are under-represented in the Australian screen industry? ☐ Female identity □ Non-binary □ Age (55+) ☐ Aboriginal identity

☐ Torres Strait Islander identity

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☐ Cultural and linguis☐ Person with a disab☐	•	
□ LGBTQIA+□ Regional or Remote□ Low socio-economic□ Other:	e Queenslander (150KM+ from Brisbane or G c status	old Coast CBD)
Personal Stateme	nt	
Please provide a sta workshop. *	tement explaining why you wish to part	icipate in the
Word count:		

Applicant declaration

Must be no more than 150 words.

- 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, after making all reasonable inquiries, true and correct.
- The applicant undertakes to promptly 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 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.

Disclosure of project information:

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 You acknowledge and agree that Screen Queensland 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. It is your responsibility to update Screen Queensland if there has been any changes to the information submitted in your application form.

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.

	□ Opt Out		
Authorised Signatory			
Name *	First Name	Last Name	
Submission Date *	Must be a date.		
	dd/mm/yyyy		