

JOSEP GOL – IEFC TRAINING GRANT

REGISTRATION FORM TO BE COMPLETED BY THE AUTHOR OF THE PHOTOGRAPHS

Name and surname: _____

Country of origin: _____

Postal address: _____

Email: _____

Telephone number: _____

Information on current or past studies relating to photography:

Web/blog: _____

Title of the documentary project: _____

Short description of the project: Please send as an attachment (maximum 300 words)

Short biography of the author: Please send as an attachment (maximum 300 words)

Photo captions (optional): Please send as an attachment (maximum 50 words per image identified numerically)

With this registration, I declare:

- That the attached photographic project meets the principles of a local theme stated by the festival.
- That I am the author of the attached photographic material and the owner of the copyright.
- That I have permission to disseminate from the people who appear in this report and any other authorisation that is required.
- That I authorise Sant Pol DOC to use the attached material, according to the terms and conditions that are established in the rules governing the first edition of the festival.
- That I have read the rules and declare that I accept all of the conditions for participation proposed by Sant Pol DOC.

Name and surname:

Place and Date:

Signature: