

FILM SUBMISSION FORM for the Senior Movie Film Festival 2025

Title of the movie:
Film production year:
Director / author of the film:
Film producer:
Author's address:
Contact phone number:
Date of birth:
E-mail:

Film description (up to 350 characters)
--

Director's biography (up to 300 characters)

I declare that I am the owner or co-owner of the copyright of the submitted film and I am taking over any disputes arising out of it, freeing the organizers of the SENIOR MOVIE festival from the legal responsibility.

I agree to the processing and publication of my personal data for purposes related to the organization of the Senior Movie Film Festival and a free public screening of the film submitted during the festival screenings and screenings promoting the Senior Movie Festival.*

I submit a film for the competition and accept the regulations of the 8th Senior Movie Film Festival

date and legible signature of the author / producer of the film:

.....
The application form should be sent to the following address: Stowarzyszenie Kamera al. Papieża Jana Pawła II 17, 70-445
Szczecin / Poland.

The photo or scan of the signed application form should be sent to the address: ngokamera@gmail.com

* In accordance with the provisions of the Act of 29 August 1997 on the Protection of Personal Data, and, starting from 25.05.2018, in accordance with the Regulation of the European Parliament and of the Council (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).