**Video Project “DESTINI INCROCIATI” (Edition no. 9)**

Venice, Santa Margherita Auditorium –Ca’ Foscari University 23rd, 24th, 25th of November 2022

**PARTECIPATION PROPOSAL/ FORM**

I, the undersigned (*given name and surname of the project responsible*)

………………………………………………………………………………………………………………………………………………..

resident in ……………………………. street ……………………. street number. ………. postcode ……………. County/District ………………. phone number……………………………… e-mail ……………………………………

In the name of the enterprise /institute…………………………………………………………………………….

REQUIRE TO PARTICIPATE AT THE “DESTINI INCROCIATI” FESTIVAL with the video project:

**Title: ……………………………………………………………….**

ARTWORK DESCRIPTION

**Production date and location**

…………………………………………………………………………………………………………..

**Title** ………………………………………………………………………………………………

**Author**  …………………………………………………………………………….

**Producing institution** …………………………………………………………………………….

**Leng**th ……………………………………………….

**Format** …………………………………………….

**Abstract** (text between 1.000 and 2.000 keystrokes, spaces included)

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Date and signature ……………………………………………………….

PRIVACY

With this form, I authorize the National Network Theatre in Prison to the computer processing of the necessary personal information in view of the festival, as defined by the D. Lgs. 30.06.2003 n. 196 and following amendments and additions.

Signature ………………………………………………………..

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Venice, Santa Margherita Auditorium – Ca’ Foscari University 23rd, 24th, 25th of November 2022

**CONSENT FORM**

I, the undersigned (*given name and surname of the project responsible*)

………………………………………………………………………………………………………………………………………………..

resident in ……………………………. street ……………………. street number. ………. postcode ……………. County/District ………………. phone number……………………………… e-mail ……………………………………

In the name of the enterprise /institute…………………………………………………………………………….

**I authorize**

the usage of the artwork by the Organizing Institution of the festival DESTINI INCROCIATI, Theatre in Prison National Project for divulgation, informative, promotional, and educational purposes, requiring to specify the name of the author and institution which produced the artwork. Concerning the usage of footage and voices of people in the audio/video document, I declare that I already have their consent.

**I declare**

- That the artwork provided by me is an original production and does not plagiarize pre-existent artworks, and that its content does not go against current laws concerning the rights of third parties and does not have defamatory intents.

- that the artwork soundtrack is original and/or we have absolved obligations concerning copyright and/or Siae.

In any case, I absolve the promoting institution of any civil or penal responsibility, and I assume any responsibility for the usage of the aforementioned material.

Date and signature …………………………………………………………………………..

PRIVACY

With this form, I authorize the National Network Theatre in Prison to the computer processing of the necessary personal information in view of the festival, as defined by the D. Lgs. 30.06.2003 n. 196 and following amendments and additions.

Signature ………………………………………………………..