Entry form **HALO ECHO+** 2024

**The 13th International Children and Youth Animated Film Festival**

**Wrocław, 15-17.03.2024**

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| **1** | Title of the film | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - | | | | | |  |
| **2** | Individual work:  - **Full name**  - author’s age *(important!)*  - address, phone , e-mail | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - | | | | | |  |
| **3** | Team work:  - **Authors' full names**  - authors' age *(important!)*  - underline the leader’s name and give his/her address, phone and e-mail | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - | | | | | |  |
| **4** | **Duration**  *format:* h:mm:ss **>** | - - - - - - - - - - - - | | Year of completion of the film  **>** | | - - - - - - - | |
| **5** | **Film format**  (please indicate) **>** | **AVI** | **MP4** | | **MPG** | | **MOV** |  |
| **6** | Author’s legal guardian  *(for individual works)*    **Films owner**  *(for team works)* | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -  *(first name, surname, address, phone, e-mail)*  - - - - - - - - - - - - - - - - - - -- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -  *(first name, surname, address, phone, e-mail)* | | | | | |  |
| **7** | - **Delegating institution:**  name, address, e-mail, phone  - artistic supervisor’s full name, phone | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -  - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - | | | | | |  |

I declare that I am acquaint with the Rules and Regulations of **The 13th International Children and Youth Animated Film Festival HALO ECHO+ 2024** published on the Festival’s website **< al-halo-echo.pl >**

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*Place, date Signature of legal guardian or the supervisor representing the delegating institution*

1. Please send a scan of **the application form** filled in BLOCK (computer) to the following address:

[haloecho.world@gmail.com](mailto:al.haloecho@gmail.com)

a film sent to the same address by We Transfer by **January 31, 2024**

**OR**

1. DVD CDs with **the application form** filled in the PRINT (computer) should be sent to the following

address:

**Dolnośląskie Centrum Filmowe, ul. J. Piłsudskiego 64a, 50-520 WROCŁAW, POLAND**

with the note **HALO ECHO+ 2024**