National Short Film Festival on Chavarul

(A testament of a loving father! By Saint Kuriakose Elias Chavara)

1. Title					
2. Language					
3. Category	General		Camp	us	
4. Format			•		
5. Duration					
6. Year of production					
7.Name & Address of the					
Producer with Telephone					
Number, Mobile and e-mail					
8.Name & Address of the					
Director with Telephone					
Number, Mobile and e-mail					
9.State whether this is a					
maiden attempt of the					
Director	(a) 1 la a		f tl	:	f C. l / l
		-		-	m for Selection/Jury
	or for shows or any other screening Chavara Cultural Centre may consider necessary. (b) I have gone through the Rules & Regulations of the Chavara Short Film festival 2017 and hereby agree to abide by them. (c) I am submitting this film as an entry in my capacity as the Producer/Director of the film & hereby declare I am authorized to				
	do s		ctor or the min d	t hereby deciare	e i am authorized to
	 (d) I hereby declare that the information provided is true to the best of my knowledge. I also understand Chavara Cultural centre has the right to reject any entry at any stage if the information entered in this form is found to be incorrect. (e) I submit herewith all the attachments mentioned in the Rules 				
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	anc.	Balations		Terre Gricon 2.5th	•
Signature					
Name					
Place					
Date					
For Office purposes:				_	
Date of receipt:				ceived by DD /N	Money Order or Cash
Registered as Entry in	General o	ategory	/ Campus		
Check list verified			Γ		
Entry No.			L		

Festival Chairman Festival Director