

Photographic Archive of the Sacred Convent of Saint Francis in Assisi

Form to request authorization for videographic filming

This form, duly completed in every part and signed, should be scanned and sent via email in PDF format, together with the photocopy of a valid identity document of the applicant, to the following address: archiviofotsc@gmail.com

It is OBLIGATORY that requests be submitted at least FIVE days before the date on which you intend to shoot.

Applicant's data

First and last name	
Qualification or profession	
Institution	
Street and no.	
Postcode/ Zip code	
City	
State	
Tel.	
Fax	
E-mail	
tax code or VAT	

Received registration (if the data differ from those provided above)

Social reason	
Street and no.	
Postcode/ Zip code	
City	
State	
tax code or VAT	

The undersigned asks the Director of the Photographic Archive of the Sacred Convent of Saint Francis in Assisi for reproductions of the following images:

1.	
2.	
3.	
4.	
5.	
6.	

7.	
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9.	
10.	
11.	
12.	
13.	
14.	
15.	

In the ways and means indicated below:

Responsible for filming	Name, surname, date of birth _____ Mobile number: _____
Auxiliary staff (if more than five, attach a list with name and date of birth of all)	Num. ____ People Name: _____ Surname: _____ Date of birth: _____ Name: _____ Surname: _____ Date of birth: _____ Name: _____ Surname: _____ Date of birth: _____ Name: _____ Surname: _____ Date of birth: _____ Name: _____ Surname: _____ Date of birth: _____
Equipment	
Insurance coverage	
Day/s of filming (indicate the date / dates)	
Time of filming (normally available Hours: 8: 15-10: 15; 16: 15-18: 15)	

Furthermore declares also that the images will be used for the following transmission or editorial project:

Product type	<input type="checkbox"/> film <input type="checkbox"/> fiction <input type="checkbox"/> documentary <input type="checkbox"/> videoclip <input type="checkbox"/> movie <input type="checkbox"/> journalistic transmission <input type="checkbox"/> advertisement (specify _____ the _____ advertised product: _____ _____) <input type="checkbox"/> other: _____
Distribution mode	<input type="checkbox"/> broadcasting <input type="checkbox"/> film for projection rooms <input type="checkbox"/> DVD or similar supports <input type="checkbox"/> online transmission
Title	
Producer	
Direction	
Actors	
Date	

Possible price cover	
Possible run provided	
Language	
Any further editions	<input type="checkbox"/> italian <input type="checkbox"/> english <input type="checkbox"/> french <input type="checkbox"/> german <input type="checkbox"/> spanish <input type="checkbox"/> japanese <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Diffusion	<input type="checkbox"/> Italy national <input type="checkbox"/> national other nation: _____ <input type="checkbox"/> international: _____ <input type="checkbox"/> world

Furthermore acknowledges having read the "Rules for the authorization of new photo shooting and videographic filming" received attached to this module, and will undertake to comply with them in their entirety. Particularly: (a) to indicate that the publication of the images was authorized by the "Photographic Archive of the Sacred Convent of Saint Francis in Assisi, Italy"; (b) not to assign to a third party reproductions made or their copies; (c) not to use the reproductions made for a different reason than the one described above without a new authorization of the Photographic Archive of the Sacred Convent of Saint Francis in Assisi; (d) to observe the national and international rules on authors' rights and copyright; and (e) to send to this Archive within six months of the granting of consent a copy in digital format of the transmission fulfilled or the indication of the mode of access to online resources; (f) to ensure free and permanent access to the person responsible of the photographic archive where the images are used within an online resource with limited access.

Place and date: _____

Signature: _____