

**ENTERTAINMENT SOCIETY OF GOA**  
**8<sup>TH</sup> GOA ANTI-TOBACCO FILM FESTIVAL 2026**

**ENTRY FORM**

(To be filled in duplicate)

Please exercise great care in filling this form as it is the PRIMARY SOURCE of data for the Society and will be reflected in its publications. Additional sheets with information/explanations duly signed, stamped and dated can be attached, if necessary.

**SECTION: NATIONAL \_\_\_\_\_ GOA \_\_\_\_\_**

1. Category of the Film: Ad Film

2. (a) Title of the Film in Roman Script :

\_\_\_\_\_

3. (a) Language of the Film

\_\_\_\_\_

(b) Whether subtitled in English language

\_\_\_\_\_

4. Name & Address of the Company/Individual/ Institution making the entry

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

(a) Whether the company is registered as an Indian entity

Company/ Individual/ Institution

Yes/ No

If yes attach: PAN Card, Registration Certificate

5. In the case of a co-production, name address of the Indian Partner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

6. Whether the company is registered as an Indian Entity

Yes / No

7. Title Registration details: (Please Attach Certificate)

\_\_\_\_\_

8. Name & Address of the Director

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

9. Author of the Story

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

10. Screenplay writer

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

11. Director of Photography

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

12. Editor

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

13. Art Director

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

14. Costume Designer

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

15. Director of Music

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

16. (a) Sound Recordist

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

(b) Back Ground Score (In case if it is other than Music Director)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

17. Principal Cast: Attach as Annexure

18. Running time (in minutes)

\_\_\_\_\_

19. Color or B&W

\_\_\_\_\_

20. Demand Draft No: with date and Amount:

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21. Bank on which the DD is drawn:

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I/We declare that I/We have read the regulations of the 8<sup>th</sup> Goa Anti-Tobacco Film Festival 2026 and accept them without reservation. In particular, I/We note the conditions of the Regulations.

I/We certify that the film entered is not a revised version or a dubbed version of a film.

Signature of the Producer (s) Signature of the right holder (s)

Seal

Date