

# **BRAIN FILM FEST 2021**

FESTIVAL INTERNACIONAL DE CINE SOBRE EL CEREBRO  
FESTIVAL INTERNACIONAL DE CINEMA SOBRE EL CERVELL

## **REGISTRATION FORM** (Please send to [films@brainfilmfest.com](mailto:films@brainfilmfest.com))

**1. Title of project:**

**2. Author/s:**

**3. Contact details (email, telephone, etc.):**

**4. Duration:**

**5. Shooting Format:**

**6. Synopsis (maximum: 300 characters):**

**7. Still photographs (3 frames that represent the project attached)**

**8. ARTISTIC & TECHNICAL DATA SHEET OF PROJECT**

**Director:**

**Script/original idea:**

**Photography/camera:**

**Production:**

**Editing:**

**Sound:**

**Cast:**

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**Year of production:**

**Nationality:**

**Production company (if any):**

**9. Has the work participated in other festivals? If so, in which?**

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## **Declaration of participation and acceptance of terms of the XI Solé Tura Award:**

Through the present statement, I (name of signatory.....),  
ID nº ....., accept the rules and regulations of this competition and agree to  
accept all decisions taken by the jury of the XI Solé Tura Award, organized by Pasqual  
Maragall Foundation, Minimal Films and Uszheimer Foundation.

Date:

**Signature**

**Print name**