



PSSA HONOURS AUDIO VISUAL ENTRY FORM

Name (as in membership records) _____

PSSA Membership Number _____

Name (as you would like it on your certificate) _____

Address _____

Telephone _____ Cell _____

Email _____

Club _____

Honour for which application is made LPSSA / APSSA / FPSSA

List of AVs entered – they may be entered in any of the following categories and should follow the rules for that specific category:

Documentary / Open

1. _____

Format _____ Running Time _____ Category _____

2. _____

Format _____ Running Time _____ Category _____

3. _____

Format _____ Running Time _____ Category _____

4. _____

Format _____ Running Time _____ Category _____

I hereby certify that all the images and elements included therein are my own and that no second party can claim authorship of any part of the said images - excepting in the case of documentary applications.

Full details should be given on an accompanying sheet.

Any further information should be given on an accompanying sheet.

Furthermore I certify that all actions in reaching the final presentation have been made by myself.

I certify that I have read and understood the application form & info sheets and that I have not transgressed any of the rules listed therein.

Applicants signature _____ Date _____