

>> APPLICATION FORM



PARTICIPANT 1
Name
Email
Phone
Previous experience in radio and/or film

PARTICIPANT 2
Name
Email
Phone
Previous experience in radio and/or film

PARTICIPANT 3
Name
Email
Phone
Previous experience in radio and/or film

PARTICIPANT 4
Name
Email
Phone
Previous experience in radio and/or film

PLEASE PROVIDE A BRIEF OUTLINE OF YOUR PLANS FOR THIS PROJECT (interviews, research, etc.)

STATEMENT TO BE SIGNED BY EACH PARTICIPANT:

"I agree to familiarize myself with and adhere to the broadcasting policies of the CRTC and UFMF. I agree that a minimum of one group member will attend all training sessions provided by UFMF. I understand that failure to comply with these regulations will result in my disqualification from Audible Perspectives: UFMF's Radio Documentary Challenge."