



DHWANI-A SPECIAL FILM FEST- 2025

ENTRYFORM

Deadline: 27th September 2025

SECTION A-CONTACT DETAILS

Reference Number:

1. Full Name of Filmmaker(s) maximum 2 people
1.

2.

2. Company Name (if applicable)

3. About Filmmaker(s)/ Company Within 50 words

4 A. Address

B. City C. Pincode

5. Email ID(s)
1.

2.

6. Mobile No.(s) With area code ex. (+91)9876543210
1.

2.

7. Entry Category General Student

SECTION B - FILM DETAILS

8. Name/Title of Film

9. Total Run Time
(including front and back credits)

Upto 1 Minute Upto 5 Minutes Upto 30 Minutes

10. Synopsis
(in 50 - 70 words)

11. Language of Film

12. Are Subtitles available in English
(*Subtitles are mandatory for film)

Yes No

SECTION C - OTHER DETAILS

13. Is your Protagonist(s)/Main Lead(s) a person(s) with Disability

Yes No

If Yes provide their 13B. Name

13 C. Email

13D. Mobile No.

14A. Have you participated in DHWANI-A Special Film Fest before (previously We Care Film Festival, Odisha):

Yes No

14B. If yes, which year

15A. How did you hear about DHWANI-A Special Film Fest

14 B. State, If Other

Signature:



FILMMAKER AGREEMENT

1. This is to certify that I/we, am/are applying to the DHWANI -A Special Film Fest scheduled on 14th and 15th October 2025, at Bhubaneswar, Odisha organized by Aaina
2. I have understood the rules and regulations of the DHWANI-A Special Film Fest and fully abide by them while submitting my film entry to the contest.
3. I/we certify that my/our film is eligible for this festival and that I am/wear eaware of the restrictions that apply.
4. I am /we are aware that I/we will not be able to withdraw my /our film, if accepted.
5. I have uploaded proof payment (mandatory) and proof of studentship (if applicable).
6. I agree that the decision of the Jury is final and I will not hold Aaina responsible for the results of DHWANI –A Special Film Fest.
7. I declare that prior to filming I have obtained the consent of the people and parents/ guardian of the children who have participated/ acted/ are depicted in my film entry to the DHWANI - A Special Film Fest.
 Yes No NA (*in case of animation*)
8. I own the entire copy right to my entry and the rear enoinfringements in any part of my entry to DHWANI - A Special Film Fest.
9. I hereby accept the decision of the organizer not to consider my film entry to the DHWANI-A Special Film Fest in case it is in complete in any respect and/or it is derogatory / discriminatory / undignified depiction of any person or character.
10. I hereby grant to Aaina the right to produce, display, screen, air on television and disseminate worldwide and in perpetuity in any traditional or electronic media format their likeness/form and conversation as shown in the audio visual.
11. I declare that I am/all film-makers are 18 years and above of age.

The information supplied in this form is true and accurate.

Name:

Signature:

Seal (if applicable):

Date:

Place:

Note: Films will not be considered unless complete information has been received. Aaina serve all right to use this film in different platforms for education & awareness purpose.

For any further information please contact to (0674)3511945,2360630 or email to support@aaina.org.in