



## FILM IMMERSION PROGRAMME REGISTRATION FORM

### Contact Information

Name \_\_\_\_\_  
School \_\_\_\_\_  
Department \_\_\_\_\_  
Email \_\_\_\_\_  
Contact Number \_\_\_\_\_

*Kindly indicate your interest by ticking the respective boxes:*

#### **IMMERSE – School Talks**

##### **i. Duration Preference**

- 30 min  
 50 min

##### **ii. Timing Preference**

- Morning Assembly (~8am – 9am)  
 Curriculum Period (~10am – 12noon)  
 After School (2pm onwards)

##### **iii. Preferred Date(s)**

(Between 2 Apr – 31 Aug 2018)

\_\_\_\_\_

#### **VOLUNTEER – Volunteer Opportunities**

- I'm interested, please contact me to follow up.

#### **EXPERIENCE – Attend the Festival**

- I'm interested, please contact me to follow up.

#### **Does your school have any other related programmes we can be involved in?**

- Career Fair / Recruitment Drive  
 Arts Elective Programme  
 Related CCA groups  
 Open House  
 Others: \_\_\_\_\_

#### **Do you have any suggestions for our Film Immersion Programme:**

#### **Would you like to join our mailing list to receive latest updates on SGIFF youth-related programmes?**

- Yes, please !  No, thank you!