

# APPLICATION FORM

## APPLICANTS DETAILS

Applicant Name:

Date:

Address:

Email:

Daytime Tel no:

Mobile:

## AGENTS DETAILS

Agent Name:

Email:

Address:

Daytime Tel no:

Mobile:

## COMPANY DETAILS

Agent Name:

Email:

Address:

Daytime Tel no:

Mobile:

I agree to become a member of the Screen Directors Guild of Ireland and listed as a member on the official SDGI member record.

I provide my consent for SDGI to publish my personal contact details on the SDGI website/directory  Yes  No  
OR

I would like my personal contact details to remain care of SDGI  Yes  No

I consider myself to be a director working in and/or available for work in the following areas (please tick):

- |                 |                          |                          |                          |
|-----------------|--------------------------|--------------------------|--------------------------|
| Animation       | <input type="checkbox"/> | Short Film               | <input type="checkbox"/> |
| Commercials     | <input type="checkbox"/> | Television Entertainment | <input type="checkbox"/> |
| Corporate/Promo | <input type="checkbox"/> | Television Drama         | <input type="checkbox"/> |
| Documentary     | <input type="checkbox"/> | Television Soap          | <input type="checkbox"/> |
| Feature Film    | <input type="checkbox"/> | Video Games              | <input type="checkbox"/> |
| Music Videos    | <input type="checkbox"/> | Video Art                | <input type="checkbox"/> |

I consent to have my website address

linked to SDGI website.

## METHOD OF PAYMENT

- Cheque   
Standing Order

Applicant Signature:

Date:

Please return completed application form to Liz Dodd, Executive Administrator, SDGI, Curved Street, Temple Bar, Dublin 2 Tel: 01 6337433 Email: liz@sdgi.ie

## STANDING ORDER MANDATE

Members Bank Details

Bank:

Address:

Name (s) of Account holder(s):

Amount

Account No:

Sort Code

Crediting Bank Details:

Bank of Ireland, Camden Street, Dublin 2

Account Name: SDGI

A/C No: 88935715

Sort Code: 90-01-13

Please make a payment on receipt of this instruction and thereafter on 31st of January.

Signed:

Date:

