



## SHORT & DOCUMENTARY Entry Form

Submitting the Entry Form for following section (choose one and give ✓ in the box) :

	<u>National Competition:</u>	<u>Non Competitive Sections:</u>
SHORT	<input type="checkbox"/>	<input type="checkbox"/>
DOCUMENTARY	<input type="checkbox"/>	<input type="checkbox"/>

**1. Film Details:**

Title of the Film

(Original): \_\_\_\_\_  
(IN CAPITAL LETTERS)

(In English): \_\_\_\_\_  
(IN CAPITAL LETTERS)

Month & Year of Production: \_\_\_\_\_

Language: \_\_\_\_\_

Running Time: \_\_\_\_\_ (in minutes) Tint: i. Colour ii. Black & White

Film shot on (Specify): \_\_\_\_\_ Screening Format: \_\_\_\_\_

Aspect Ratio: i. 4:3 ii. 16:9 iii. Other (Specify) \_\_\_\_\_

Sound: i. Stereo ii. Mono iii. Other (Specify) \_\_\_\_\_

Date & Place of 1<sup>st</sup> Theatrical Screening: \_\_\_\_\_

Festival(s) at which film has already participated: \_\_\_\_\_  
(Please mention name & dates of Festival and also whether it was in competition or not)  
\_\_\_\_\_  
\_\_\_\_\_

Prize(s) won, if any: \_\_\_\_\_  
(Please mention details of the prize)  
\_\_\_\_\_

Synopsis: \_\_\_\_\_  
(In short)  
(Attach separate sheet for detailed synopsis)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Director(s):**

Name (1): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name (2): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_

Cell (1): \_\_\_\_\_ Cell (2): \_\_\_\_\_

Email (1): \_\_\_\_\_ Email (2): \_\_\_\_\_

Fax: \_\_\_\_\_ Web: \_\_\_\_\_

Director's Biography (1): \_\_\_\_\_  
(In short) \_\_\_\_\_  
\_\_\_\_\_

Director's Biography (2): \_\_\_\_\_  
(In short) \_\_\_\_\_  
\_\_\_\_\_

**3. Producer(s):**

**Producer**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

**4. Co-Producer(s):**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

**5. Production Company:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

**6. Co-Production Company:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_  
 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_ Web: \_\_\_\_\_

**7. Distribution Company in India (if any):**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_  
 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_ Web: \_\_\_\_\_

**8. Cast & Crew:**

Main Cast: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Story: \_\_\_\_\_  
 Script / Screenplay: \_\_\_\_\_  
 Director of Photography: \_\_\_\_\_  
 Editor: \_\_\_\_\_  
 Music: \_\_\_\_\_

**9. Applicant's Details:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Tel. (1): \_\_\_\_\_ Tel. (2): \_\_\_\_\_  
 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_ Web: \_\_\_\_\_

The applicant agrees to have read and accepted the rules & regulations for participation in Short and Documentary Section in the 22<sup>nd</sup> Kolkata International Film Festival 2016. The applicant confirms that he / she has the requisite authority or has obtained the requisite authority to enter this film in **22<sup>nd</sup> KIFF 2016** and make available the DVD/BLUERAY for screening.

\_\_\_\_\_  
(Stamp)

\_\_\_\_\_  
(Applicant's Signature)