

FILM SUBMISSION FORM

**24th ANN ARBOR
POLISH FILM FESTIVAL
November 2017**

Documentary and Short Narrative Films

<http://annarborpolonia.org/filmfestival>

CONTACT INFORMATION

Contact Name:
Production Company Name:
Street Address:
City: State/Province: Postal/Zip Code:
Country:
Phone(s):
E-mail:
Web Page:

FILM INFORMATION Type: Documentary (nonfiction) Narrative (fiction, dramatized bio)

Original Title:
English Title:
Director:
Screenwriter:
Cinematographer:
Music:
Main Cast:
Producer:
Country of Production:
Total Running Time: (minutes) Year of Production:
Awards:

Brief Synopsis (below): Debut? (a director's first film): Y N

FILM STREAMING LINK (Vimeo, YouTube, etc.) Only provided to jurors for use during evaluation.

URL:

.....

Password (if required):

**Please submit your application along with a broadcast authorization form to:
pcfannarbor@gmail.com**

Hard copy submissions (DVD screeners along with the form):

Submissions
Ann Arbor Polish Film Festival
P.O. Box 130763
Ann Arbor, MI 48113 USA

ENTRY DEADLINE: September 1, 2017

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BROADCAST AUTHORIZATION

I certify that I hold all necessary rights for the submission of this work.

I certify that I hold broadcast rights to this work within the United States.

If this work is selected, I grant the Polish Cultural Fund – Ann Arbor limited, non-exclusive rights to broadcast clips from this film as promotion for the Ann Arbor Polish Film Festival. No clip shall exceed two minutes. This agreement expires on November 30, 2017.

Please submit your application along with a broadcast authorization form to:
pcfannarbor@gmail.com

Title of Work:

E-mail of Applicant:

Name of Applicant:

Date:

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