

Media Arts Council Film Festival
Entrance Form

Applicant's Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Email address: _____

Website (if applicable): _____

Film Name: _____

Length:

Short-Short (\$5.00 each film)

Short (\$15.00 each film)

Feature Length (\$20.00 each film)

Category:

Local Filmmaker

Narrative

Documentary

Animation

Experimental

Fee Submitted (check or money order, payable to Media Arts Council): \$ _____

Credits:

Director: _____

Writer: _____

Producer: _____

Actors: _____

Music: _____

Other: _____

Brief Description of the Film (75 words or less): _____
