



23rd Kolkata International Film Festival
10 - 17 November, 2017



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 1st 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 23rd Kolkata International Film Festival 2017. The applicant confirms that he / she has the requisite authority or has obtained the requisite authority to enter this film in **23rd KIFF 2017** and make available the DVD/BLUERAY for screening.

(Stamp)

(Applicant's Signature)