



Official Entry Form - FutureWave Shorts 2015 Seattle International Film Festival

SIFF Film Center • 305 Harrison St • Seattle, WA 98109
Tel: 206.464.5830 • Fax: 206.264.7919 • www.siff.net

FILM INFORMATION *(please type or print)*

Film Title (English) _____

Original Language Title (if not English language) _____

☐ Narrative ☐ Documentary ☐ Experimental ☐ Animation

BRIEF STORY DESCRIPTION *(please use space provided, and put some thought into this. This description will be used in festival programs)*

IMPORTANT INFORMATION

March 2, 2015 Submission deadline
April 30, 2015 Notification of acceptance
May 8, 2015 Film prints/files due
May 14 - June 7, 2015 Festival dates

Requirements: Films must have been completed no earlier than January 2014. **Filmmakers must be aged 18 or younger at the time of submission, and include a photocopy of their driver's license or other proof of age with submission.**

Entries must be no longer than 10 minutes (including credits and titles). **THE SHORTER THE BETTER!**

Deadline: All film submissions must be shipped prepaid and packed in proper containers to arrive at the SIFF offices by the posted deadline.

Format: All films must be submitted on DVD or a valid Internet link to the film in high quality. Do not put multiple works on the same DVD.

ENTRY FEE : \$20 *(ENTRY MUST BE RECEIVED BY MARCH 2, 2015)*

FEE Payment *(please check one)* **WAIVED FOR WASHINGTON STATE RESIDENTS**

☐ Check/Money Order - US Funds (Payable to: SIFF)



Card Number _____

Expiration Date _____

Cardholder's Signature _____

Cardholder's Name (please print) _____

Billing Address _____

Certificate of Entrant

I, the undersigned, acknowledge and agree that to the best of my knowledge, all of the statements in this document are true; I am duly authorized to submit this film to the Seattle International Film Festival (SIFF); I hold SIFF harmless from damage to or loss of the film print en route due to improper containers or otherwise; the film is not subject to nor is threatened by any litigation; I acknowledge that **ALL submission materials** become the property of SIFF; and that I accept all of the submission regulations stated within on the submission form. **I verify that all content in this submission is original, I have signed releases from all participants, and I am currently aged 18 or younger.**

Signed (Entrant) _____

Print/Type Name _____

Date _____

PRODUCTION INFORMATION

Preview Format

☐ DVD ☐ Link: _____

Did you have help from someone over 18 years old? ☐ Yes ☐ No

If so, what kind? _____

Running Time _____ *(in minutes)*

Filmmakers:

Please print clearly - this will be used in festival programs

Director - Name(s) and age(s): _____

Screenwriter - Name(s) and age(s): _____

Camera - Name(s) and age(s): _____

Editor - Name(s) and age(s): _____

Other Crew - Name(s) and age(s): _____

Principal Cast _____

Teacher/Mentor's Name (if applicable): _____

School/Organization (if applicable): _____

Primary Contact

Company/Organization (if applicable) _____

Name _____

Relation to film _____

Email (PLEASE PRINT CLEARLY) _____

Address _____

City _____ State _____ Zip _____ Country _____

Phone _____

Fax _____