



The WORLD FILM Festival

August 23 – September 3, 2012

MONTREAL

The World Film Festival — Montréal
1432 de Bleury Street, Montréal (Québec) Canada H3A 2J1
Tel.: 514 848-3883 • Fax: 514 848-3886
E-mail: info@ffm-montreal.org • Internet: www.ffm-montreal.org

REGISTRATION FORM

DEADLINES

Feature films: January 1st to July 6

Shorts and medium length films: January 1st to June 15

ATTENTION: if your film is selected, the information in this form will be used to prepare the Festival catalogue. Please fill it carefully.

1. FILM

Original title _____

French title _____

English title _____

Original language _____ Language of subtitles _____

FILM GENRE

Feature film Medium length film Short film Fiction Documentary Animation

Year & month of end of production _____

Release date of the film in the country of production _____

Date and place of first public presentation in the country of production _____

Date and place of first public presentation in North America _____

Festivals where the film has already been presented _____

Awards won at these festivals _____

Will the screening at the Festival be a premiere?

World premiere International premiere (outside the country of production) North American premiere Canadian premiere

If your film has a web site, address _____

2. PRODUCTION

Country of production _____ Countries of coproduction _____

Name of producer _____

Production company (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

Coproduction company (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

World sales (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

Canadian distributor (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

3. AUTHORS

Director (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

Script _____ Dialogue _____

Based on (title) _____ by _____

Photography _____ Music _____

Art director _____ Editor _____

Sound _____ Costume designer _____

4. MAIN CAST

5. DOCUMENTATION

Short synopsis of the film _____

Is this the first feature-length fiction film of the director? Yes No

a) Application for selection. Please send to the Festival:

- Synopsis (approx. 20 lines)
- Biography and filmography of director
- Full cast and credits
- Stills from the film
- Photo of the director (feature films)
- Press book (if available)
- For pre-selection, send a DVD (NTSC or PAL) even if the film was shot on 35 mm or other formats.

b) Film already selected. Please send to the Festival:

- Original dialogue list (films accepted in Competition)
 - List of subtitles (films accepted in Competition)
 - Stills from the film (by email)
 - Posters (5 to 10) for exhibition during the Festival (they can be sent with the projection copy)
 - Press books for the media
 - Excerpts
-

6. TECHNICAL INFORMATION FOR THE PRESENTATION DURING THE FESTIVAL

Colour Black & white Language of selection entry _____ with subtitles in _____

RUNNING TIME (in min) _____ Footage _____ Number of reels _____

35 mm 70 mm DCP Digital betacam HDCAM

SCREEN RATIO 1.37 1.66 1.85 Scope

SPEED 24 images / sec. 25 images / sec.

SOUND

Optical Magnetic Dolby SR Dolby SRD DTS SDDS

Other information _____

Value of the lab cost of the print in Canadian dollars _____

7. PRINTS

The Festival will assume insurance responsibility from when the print is delivered to the Festival's office, until it is returned to the carrier. Prints must be sent **PREPAID** by a delivery service which includes customs clearance (example: FEDEX, DHL, EMS).

Sender of the print to the Festival (name and address) _____

Tel.: _____ Fax: _____ E-mail: _____

Return address for the print or tape after the Festival _____

Tel.: _____ Fax: _____ E-mail: _____

RETURN BY (FEDEX, DHL, EMS, etc.) indicate _____ Account number _____

Other, please indicate _____

SHIPPING OF DVD FOR PRESELECTION

Preselection DVD must be sent to the Festival with the following statement: **“without commercial value, for cultural purposes only”**. If the sender wishes to retrieve the DVD, please indicate by which messenger service and the account number.

DVD to be sent back at the owner's expense Yes No

Messenger service and account number _____

8. TELEVISION EXCERPTS

Excerpts (max 3 min. each) will be sent Yes No

If you cannot send excerpts of your film, do you authorize the Festival to reproduce one excerpt (max. 3 min.) Yes No

INTERNET EXCERPTS

If an excerpt already exists on Internet, please indicate the link _____

Do you authorize the Festival to make one excerpt available on its website? Yes No

Signature _____ Name in capital letters _____

9. ADDITIONAL SCREENINGS

For each film, the Festival will schedule a maximum of five screenings including the press screenings.

10. AGREEMENT

Production company lending the film _____

Tel.: _____ Fax: _____ E-mail: _____

In the event that the company lending the film is not the production company, the company (name and address) _____

Represented by (name) _____

Tel.: _____ Fax: _____ E-mail: _____

- hereby declares to be empowered by the production company to include this film in the Montreal World Film Festival. The undersigned commits to not withdraw the film from the Festival. It is understood the Montreal World Film Festival will strictly abide by the regulations for international film festivals provided by the I.F.F.P.A. and is bound by any further agreement in this entry form. The Regulations of the Festival are part of this agreement.

Name _____ Position _____

Signature _____ Date _____

11. ENTRY FEE

Certified cheque or money order payable to the World Film Festival. (CAD \$100 for feature films / CAD \$40 for short films)

CAD \$100 CAD \$40

VISA card number _____ Valid until MM____/YY____

MasterCard number _____ Valid until MM____/YY____

Credit card holder's name _____

Card holder's signature _____ Date MM____/JJ____/YY____