



2011 SUBMISSION FORM

For office use only

Date: _____ E-mail: _____
Film Title: _____ Telephone: _____
Filmmaker: _____ Street Address: _____
Contact: _____ City, State, Zip, Country: _____

SUBMISSION INFORMATION

Running Time: _____ Submission Format/URL: _____
Completion Year: _____ Exhibition Format: _____
Language: _____ Film Website: _____
Genre/Topic: _____ Tagline: _____
Prior/Current Broadcast/Screening/Distribution Deals: _____

Are you applying to a specific category/screening?

How did you hear about DCTV Presents?

Please include a short synopsis of the film and filmmaker bio with this submission form.

ENTRY FEE

\$7 DCTV Members \$10 General Cardholder Name: _____
Payment Method: Cash Credit Check (payable to DCTV) Cardholder Address: _____
Card number: _____
Security Code: _____ Exp Date: _____

SUBMISSION CHECKLIST

Entry Form Entry Fee Preview copy/url Short Synopsis (25 words) Filmmaker Bio (25 words)

SEND COMPLETE ENTRIES TO

DCTV Presents Submissions
DCTV
87 Lafayette Street
New York, NY 10013, USA

Or email the completed form to [submissions @ dctvny.org](mailto:submissions@dctvny.org)

I hereby permit DCTV Presents to use the submitted program and related materials for screening events and in publicity and outreach activities relating to DCTV Presents. This may include, but is not limited to, use of the work and its materials on DCTV's website. The filmmaker or submitter will be notified before any and all screenings of submitted work.

Signature: _____ Date: _____

See www.dctvny.org/dctvpresents/submit for rules, guidelines, submission fees and deadlines.