

deadCENTER Film Festival

Application for Submission

Send Application, Film and Fees to:
deadCENTER Film Festival
P.O. Box 850368
Yukon, OK 73085-0368

*Fees and deadlines listed on: www.deadcenterfilm.up.to (Make checks to: deadCENTER Film Festival)

Filmmaker: _____

Address: _____

Phone # : ____ (____) _____

Email: _____

Where has your film shown? _____

Description of Film (include Original Format,
Genre and completion date (attach extra sheets if needed))

Film Title

Total Run Time: _____

Submission Format (check one below)

NTSC VHS DVD

Check all that apply

Oklahoma Filmmaker

OK Premiere

US Premiere

World Premiere

Check Film Type

Youth Film (Under 18 yrs, under 30 min)

Short (under 45 min.)

Feature (45-90 min.)

Feature (Over 90 min.)

Film School Students: Please list what film school you attend _____

READ THIS LEAGL HOOHA!!! I give deadCENTER the non-exclusive rights to exhibit my work and use portions of it for promotional purposes. I understand that deadCENTER is not responsible for the loss or damage to my work. deadCENTER will not send back VHS or DVD submission. DeadCENTER is not responsible for any copyright infringe met that might exist in my film. I acknowledge and agree to the conditions of this entry form.

Signature: _____ Date: _____