

# OFFICIAL RIFF 2010 STUDENT FILM ENTRY FORM

Date of Application: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Web Site URL: \_\_\_\_\_

Date Film Completed: \_\_\_\_\_

Producer(s): \_\_\_\_\_

Director: \_\_\_\_\_

Screenwriter(s): \_\_\_\_\_

Production Company, if any: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province/State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of entry contact person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of person submitting application (*if different from above*):

\_\_\_\_\_

Film School/College(s) Attending: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

BUDGET IN US DOLLARS: (Ranges) Over \$1 Million \_\_\_

Under \$1 Million \_\_\_ Under \$100,000 \_\_\_

**Actual Budget: \$** \_\_\_\_\_

FOOTAGE: # of Reels \_\_\_ Year of Production \_\_\_

In English \_\_\_ Non-English \_\_\_

Original Language \_\_\_\_\_ Country \_\_\_\_\_

GENRE: Action \_\_\_ Drama \_\_\_ Comedy \_\_\_ Romantic \_\_\_ Horror \_\_\_ Thriller \_\_\_ Fiction

\_\_\_ Non-Fiction \_\_\_ Gay/Lesbian \_\_\_ Other \_\_\_\_\_

SUBJECT TYPE: Feature \_\_\_\_ Documentary \_\_\_\_ Animation \_\_\_\_ Short Subject \_\_\_\_  
Experimental \_\_\_\_

LENGTH: Running Time: \_\_\_\_\_

SOUND: Mono Optical \_\_\_\_ 16 mm Optical \_\_\_\_ Optical Dolby A \_\_\_\_ Optical Dolby  
SR \_\_\_\_ Video SR \_\_\_\_

FORMAT: 35mm \_\_\_\_ 16mm \_\_\_\_ Video \_\_\_\_ (type) \_\_\_\_\_  
RATIO (*Important*): \_\_\_\_\_

Was this project submitted to other Festivals?  
Yes \_\_\_\_ No \_\_\_\_

Were you selected? Yes \_\_\_\_ No \_\_\_\_  
Awards (if any?) Yes \_\_\_\_ No \_\_\_\_

(List)

Do you have an agent/manager? Yes \_\_\_\_ No \_\_\_\_ If so, name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
How were you introduced to us?  
Friend \_\_\_\_ Mail \_\_\_\_ Ad \_\_\_\_ Name of Magazine/Paper \_\_\_\_\_

**IMPORTANT:** Please attach a **Short Synopsis** along with a biography  
and filmography of director, as well as cast list and credits. **Please Do Not Skip This.**

### **PAYMENT INFORMATION For Regional Student Filmmakers ONLY!**

Make check or money order (*US dollars*) payable to the **Rhode Island International  
Film Festival**, (or **RIIFF**) Send your application, materials and payment to: **RIIFF • PO  
Box 162 • Newport, RI 02840 USA. PLEASE LABEL "STUDENT" ON PACKAGE.**

#### **SUBMISSION FEES\***

<b>Video/Film Shorts &amp; Features</b>	\$25 x ____	_____
<b>Late Fee</b> ( <i>Films submitted after the June 15th deadline</i> )	\$10 x ____	_____
	<b>Total :</b>	_____

- Credit card orders can be faxed to (401) 490-6735.

#### **Method of payment** (*check one*):

\_\_\_\_ Check \_\_\_\_ Money Order \_\_\_\_ Visa  
\_\_\_\_ MasterCard \_\_\_\_ American Express Credit Card Number:  
\_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

(Print or Type)

**RIIFF FILM FESTIVAL REGULATIONS**

1. Acceptance of a film does not guarantee airline or hotel accommodations for talent or production crew. 2. The festival is responsible for the one-way shipment of the print when leaving Providence after last play date to a location comparable from where the print originated. 3. The number of screenings, days and venue is at the sole discretion of RIIFF. 4. Permission for RIIFF to use an excerpt from any accepted film/video for promotional purposes (not to exceed 2 minutes) is hereby granted unless otherwise noted.

Signed \_\_\_\_\_ Print

Name \_\_\_\_\_ Date \_\_/\_\_/\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_