

ENTRY FORM 9th CINEMA INVISIBILE - LECCE FILM FEST 2014

(please write legibly in all fields)

SHIPPING: *Lecce Film Fest at Nicola Neto, Via Cambiatori 2/1 - 42121 Reggio Emilia (Italy)* / DEADLINE: 31/10/2014

1. FILM'S DATA

Title _____ Fict. Doc. Anim.

Genre _____ Nation _____ Year _____ Time _____ Format 16/9 4/3

Language _____ Subtitle English Italian Other _____ No dialogues

Unreleased Film Italian première Principal prix _____

Short Sinopsys _____

Direction _____ Screenplay _____

Cinematography _____ Editing _____

Production _____ Music _____

Cast _____

Director's notes _____

2. DIRECTOR'S DATA (mark the data that will be published in the catalog and on the web)

Surname/Name _____ Place/Year of birth _____

Address _____

Tel. _____ E-Mail _____

Other contacts _____

Place and day _____
SIGNATURE FOR ACCEPTANCE OF COMPETITION RULES

3. LICENSE FOR DISTRIBUTION AND SCREENINGS AFTER THE FESTIVAL

I, _____, the copyright holder of diffusion and screening, authorize
"Cineclub Fiori di Fuoco" for free distribution and public screening of the above mentioned film in favor of the
entities who request it, from the year 2015 until the year _____.

Other indications: _____

Place and day _____
SIGNATURE FOR LICENSE
