

2nd Annual Latino Student Film Festival Submission Form 2009

Festival date: Saturday May 30, 2009 at the National Center For the Preservation of Democracy
111 North Central Avenue Los Angeles, 90012

DEADLINE: Submission must be received by Friday April 17, 2009

PLEASE PRINT CLEARLY THIS FORM MUST BE FILLED OUT COMPLETELY

Original Title: _____

Teacher(s): _____

Director(s): _____

Writer(s): _____

How is this film relevant to the Latino experience in the U.S.?

Production Medium: FILM VIDEO Year of Completion: _____ (Work must have been completed within the past year) Was your film previously screened in Los Angeles? No Yes
(If yes, complete next question) Date: _____ Event: _____

Location: _____ Total Running Time (Minutes):
min. **Language (If other than English): _____ English Subtitles? Yes No

CATEGORY/GENRE (Please circle one) ** Films must run 8 minutes or less unless otherwise specified. Animation Narrative Short Commercial/Newscast Music Video ** 15 min. max. --

Documentary/Mockumentary Public Service Announcement Experimental TECHNICAL

SPECIFICATIONS: (Circle One) DVD SOUND (Circle One) Format of submission copy:

DVD QuickTime DVD Mono Stereo Format of exhibition copy: Mini-DV QuickTime

DVD Dolby A Other: _____ Will you permit the use of a 3 minute extract for

Television, website, or other promotional use? Yes No

-CHECK-OFF LIST- all following items must be included with film submission to be considered

eligible: ___ Film synopsis (3-sentences max) ___ Film cover art (if any) ___ At least five film stills

(600 DPI) ___ Original title (translation in subtitles required) ___ Film Submission Form ___ One

form with each film submission. ___ Signature of your film teacher/instructor. ___ Label mini-DV

tape or QuickTime file on DVD with title, length, contact names, and teachers' email. ___ Answer

all questions above. TERMS OF AGREEMENT-I hold the Festival harmless from damage to or

loss of the print (Mini-DV or QuickTime DVD) en route or otherwise during the course of the

Festival's possession of the film, and agree to provide the festival with a print of the film at my

own risk.-I agree that all materials will be submitted and understand that submissions will not be

returned whether or not my film is selected. -I understand that the number of screenings, days,

and venue is at the sole discretion of the Latino Student Film Festival.-I understand that the

festival does not pay rental fees. Once a film is submitted for entry, it may not be withdrawn

from judging. -I understand that if my project was exhibited at last year's high school showcase,

it will be disqualified from the competition.-An electronic version of the high school log will be

provided as submissions are registered.

Teacher: (Print) _____ Date: _____ Email: _____

Teacher Signature: _____

High school/youth center: _____ YOU WILL RECEIVE AN EMAIL

CONFIRMATION OF RECEIPT. FOR MORE INFORMATION ON THE FESTIVAL

WEEKEND. CHECK OUT www.lacla.org/programs Mail all submissions to Latino Student

Film Festival 3714 Griffin Ave. Los Angeles, 90031.