



**International film festival
for children and youth**
Madrid 12th-17th november 2007

Entry Form

DEADLINE FOR ENTRIES: 1st AUGUST 2006

Complete and return with a DVD (or VHS) to:
Ana Obradors, FICI
C/Marqués de Valdeiglesias, 5, 1º Izqda.
28004 Madrid
Tel. 91 522 89 76 - Fax 91 181 23 38
www.fici.info - film@fici.info

ORIGINAL TITLE: _____

ENGLISH TITLE: _____

Country of production: _____ Year of production: _____

Original language: _____ Language of subtitles: _____

Running time: _____ mins

Weight of print: _____ kg Value of print: _____

TYPE OF FILM (please tick):

Live action Documentary Animation

Experimental Other _____

FESTIVAL VIEWING FORMAT (please tick):

35mm BETA SP (PAL) DV Cam (PAL)

mini DV (PAL) DVD Other _____

SCREEN RATIO (please tick):

1:1,33 1:1,66 1:1,85 1:2,35 Other _____

SOUND (please tick):

Optical Magnetic Silent Dolby Other _____

Main cast: _____

Target age group: _____

SHORT SYNOPSIS: _____

CONTACT DETAILS

DIRECTOR: _____
Address: _____

tel: _____ **fax:** _____ **email:** _____

PRODUCER: _____
Address: _____

tel: _____ **fax:** _____ **email:** _____

Person submitting the film: _____

Address: _____

tel: _____ **fax:** _____ **email:** _____

Spanish Distributor (if applicable) _____

Address: _____

tel: _____ **fax:** _____ **email:** _____

Please enclose a DVD (or VHS) of the film together with the Director's filmography and any stills, transparencies, production notes, promotional materials available. Please also include film credits, the list of prizes (if any) and a list of festivals in which the film has participated.
By submitting this entry form I accept the terms of the festival regulations and give my consent for a short extract of my film (less than 3 mins) to be broadcast on TV or the festival website for publicity purposes only.

Signature _____ **Date** _____