



Estonian Documentary Film Festival // Eestlaste dokumentaalfilmide festival

EstDocs 2017 Short Film Competition Submission Form

Title: _____

Running time: _____ (must be under 7 minutes plus up to 15 sec. for credits)

Year Completed: _____

Director(s): _____

Producer: _____

Writer(s): _____

Editor(s): _____

Contact Name: _____

Address Line 1: _____

Address Line 2: _____

City: _____ Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ E-mail: _____

Website: _____

Indicate the most appropriate categories:

- Amateur
- Professional
- Student (include student info)

RELEASE AGREEMENT for EstDocs Short Film Competition: the undersigned, acknowledge and agree as follows: (1) The submission is in full compliance with the submission guidelines and I have full right to submit this material to you. (2) I will fully reimburse EstDocs for any losses, damages, or expenses that may be incurred due to any false or inaccurate statement provided by me in this agreement. (3) I certify that I hold all necessary rights for the submission of my film and promotional materials to the EstDocs Short Film Competition. (4) I have read the 2017 Festival Submission Guidelines and recognize that failure to follow said guidelines will disqualify my submission. (5) I hereby grant EstDocs non-exclusive, all media rights, howsoever transmitted, in perpetuity, in the world, to exploit the submitted film.

Name, Signature and Date

Print, sign, and email a copy of the completed form to shorts@estdocs.com and include the URL for the film. DVD or Blu-ray (2 copies) and printed form can be mailed to: EstDocs Short Film Competition, 14 Adrian Cres. Markham, Ontario L3P 6Z7 Canada. One form for each submission.
SUBMISSIONS MUST BE RECEIVED AT THIS ADDRESS BY OCTOBER 2, 2017.

