

Estonian Documentary Film Festival // Eestlaste dokumentaalfilmide festival

EstDocs 2019 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:	
Amateur Profession RELEASE AGRI agree as follows: (right to submit this expenses that may agreement. (3) I co- materials to the Es Guidelines and rec	EEMENT for EstDocs Short Film Competition: the undersigned, acknowledge and 1) The submission is in full compliance with the submission guidelines and I have full a material to you. (2) I will fully reimburse EstDocs for any losses, damages, or be incurred due to any false or inaccurate statement provided by me in this entify that I hold all necessary rights for the submission of my film and promotional atDocs Short Film Competition. (4) I have read the 2018 Festival Submission cognize that failure to follow said guidelines will disqualify my submission. (5) I ocs non-exclusive, all media rights, howsoever transmitted, in perpetuity, in the world
Name, Signature a	nd 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 1, 2019.