**the8fest Submission Form**

- please submit completed form to **the8fest@gmail.com**

Name:
Email:
Origin:
English Title:
Original Title:
Filmmaker Name:
Address:
City/Country:
Postal/Zip:
Phone:
Email:
Format:
Other Format:
Sound:
Speed:
Other Speed:
Installation Details:
Production Country:
Year:
Previous Screenings:
Duration:

Here is a link to preview the film:

**The screening copy of your work must be available on film.**