**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.**