

YOUTH ITALIANMIX 2010
29 – 31th October
ENTRY FORM

Production credits

Director:

Editor:

Producer:

Sound Designer:

Screenwriter:

Composer:

Cinematographer:

Cast:

Submitted by

Name:

Address:

Role in Production:

Zip Code:

Phone:

City:

Mobile:

Province:

Fax:

Country:

E-mail:

About the work

Title:

Duration:

Year of production:

Format:

Nationality:

Brief description of the work (5 lines max)

Production tools and formats

Please indicate production tools and formats:

Mini-DV

HD

Other:

Digital Betacam

35 mm

16 mm

DVPRO

DVCAM

Super 8

Submission Format

DVD Pal

Genre

Narrative

Experimental

Design

Documentary

Animation

Music Video

Other Festivals, Awards, Screenings

Please name camera and software applications utilized (be specific)

Camera Model(s):

Audio/Sound Software:

Editing Software:

Computer Model(s):

Total and unreserved acceptance of the ITALIANMIX submission guidelines and terms and conditions

yes

no

Authorization to use personal data according to law n. 675/96

yes

no

The artist declares that she or he is of _____ nationality

Signature

Date