

# DARK BRIDGES FILM FESTIVAL

## CALL FOR ENTRIES

Have you made a feature or short film that just does not fit into the mainstream Cineplex theatre? If you have and if your film has not screened in Saskatoon then you should be sending it in for submission as soon as possible.

We are looking for cool films of all lengths to show during both our midnight series and also for our annual festival.

We do not charge an entry fee and encourage local, national and international submissions.

## ELIGIBILITY

1. This film has not screened to a public audience in Saskatoon, Saskatchewan
2. This film or video is not subject to any litigation nor is threatened by any litigation.
3. I am duly authorized to submit this film to the festival.
4. I hold the Dark Bridges Film Festival harmless from any damage to the print(s), tape(s) or disc(s) en route or otherwise during the course of the festival's possession of the film.
5. I hold the Dark Bridges Film Festival, its owners, management, juries, subsidiaries, agents, sponsors, affiliates, and etc. harmless from any and all claims of liability resulting from my entry.
6. I certify that I have full rights to the use of the music in the entered work.
7. I give permission for the Dark Bridges Film Festival to use stills, titles, copy, and/or information from the short for promotional purposes
8. I give permission for the Dark Bridges Film Festival to screen the film at the Festival as well as any Festival presentations, programs, and/or events.

## SEND SUBMISSIONS TO:

DARK BRIDGES FILM FESTIVAL  
C/O JOHN ALLISON  
920 7TH STREET  
SASKATOON, SK  
CANADA  
S7H 0Y6

## SUBMISSION FORM

English Title: \_\_\_\_\_  
Original Title: \_\_\_\_\_  
Release Date (year): \_\_\_\_\_  
Country: \_\_\_\_\_  
Language: \_\_\_\_\_  
Runtime: \_\_\_\_\_

Genre (check all that apply):

Horror   Fantasy   SciFi   Anime  
Genre Documentary  
Other \_\_\_\_\_

Exhibition Format

35 mm   DVD   Blu-Ray   Digital File  
HDCam   Digibeta

Film Credit Information

Director(s): \_\_\_\_\_  
Producer(s): \_\_\_\_\_  
Screenwriter(s): \_\_\_\_\_  
Cinematographer(s): \_\_\_\_\_  
Editor: \_\_\_\_\_  
Sound: \_\_\_\_\_  
Music: \_\_\_\_\_  
Principle Cast (No more than 6): \_\_\_\_\_  
\_\_\_\_\_

Contact Information

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_