

# 2012 Rocky Mountain Women's Film Festival Film Entry

## FILM INFORMATION

Film Title: \_\_\_\_\_

Director(s): \_\_\_\_\_

Please check:  Female  Male

Producer(s): \_\_\_\_\_

Please check:  Female  Male

Year of Completion: \_\_\_\_\_ Original Language: \_\_\_\_\_  English Subtitled

Category:  Narrative Feature  Documentary Feature  Documentary Short (under 40 minutes)

Narrative Short (under 40 minutes)

Animated

### TECHNICAL INFORMATION

Running Time (minutes): \_\_\_\_\_

Alternate Length, if available: \_\_\_\_\_

Available Exhibition Format(s): \_\_\_\_\_

Aspect Ratio

4x3

16x9

**FILM CONTACT INFORMATION** Primary Contact (in house use only; this information will remain confidential)

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Relation to film: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

### FILM DIRECTOR CONTACT (required)

Check if same as Primary Contact

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

### PRINT SOURCE (required)

Check if same as Primary Contact

(This information will appear in the Festival program as the contact source)

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Relation to film: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email:

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Website:

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**PRESS MATERIALS SOURCE (required)**

Check if same as Primary Contact

(This information will be distributed to media upon request)

Name:

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Company:

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Cell phone:

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Email:

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Website:

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**CONTACT INFORMATION**

Please send all correspondence to:

Rocky Mountain Women's Film Festival

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Colorado Springs, CO 80903

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