



CINEDAYS FESTIVAL OF EUROPEAN FILM
PI Youth Cultural Center
quay Dimitar Vlahov No. 15 MK-1000 Skopje R. of Macedonia

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17th CINEDAYS
Festival of European Film

November 8-18
2018 Skopje, Macedonia

ENTRY FORM
CineIndustry Film Market
Deadline: September 15, 2018

Original title of the film:

English title of the film:

Country:

Language:

Year:

web:

TYPE OF FILM:	Feature Film	Documentary	Animation	
PREMIERE STATUS:	World Premiere	International Premiere	Region Premiere	Country Premiere

**Festival(s) at which the film has already participated (Whether or not in competition)
if any:**

Prize(s) if (any) won at these festival(s) if any:

PRODUCTION

Producer's name:

Production company:

Email address:

Address:

Phone:

Telephone:

Email:

Website:



DIRECTOR

Director's name:

Director's biography:

Email address:

Phone:

Director's filmography:

ARTISTIC DETAILS

Screenwriter

Cinematographer

Music

Editing

Leading actors' names (acting role)

TECHNICAL DETAILS

Film Length:

Frame rate: (f/sec)

Original Language(s)

Subtitled in:

SCREENER INFORMATION

URL of Online screener:

Password:

Comment:

FESTIVAL COPY FORMAT:

DCP

Encrypted

Unencrypted

2K

4K

QuickTime

Other:

Screen ratio:

Sound:

Logline: (max. 100 words)

Synopsis: (max. 500 words)



COPY TRAFFIC

Value of the copy:

Return of copies:

Company:

Name of the couriers:

Name:

Courier's account number:

Email:

Address:

PRESS AGENT

Name:

Company:

Address:

Email:

Phone:

PRESS AND PUBLICITY MATERIAL: EXCERPTS

The Film Submitter provides several sets of different excerpts of maximum 3 minutes length each: **Yes** **No**

If excerpts are not available, the Film Submitter authorizes the festival to edit several sets of excerpts of a maximum 3 minutes length each: **Yes** **No**

For short films, the total duration of these excerpts altogether may not exceed 10% of the film's length.



FILM'S AGREEMENT TO PARTICIPATE

The production company lending the film is represented by:

Name: _____ **Position:** _____
Email: _____ **Phone Number:** _____

If the company lending the film is not the production company

Company name: _____ **Represented by:** _____
Name: _____ **Position:** _____
Email: _____ **Phone Number:** _____

Declares to be empowered by the production company to lend the print of the film

This Film is lent to the Festival on condition that the Festival abides by: The FIAPF Regulations for International Film Festivals

The additional clauses agreed upon in this film entry form

Date:

Signature: