

SUAFilm Entrant APPLICATION

The Savannah Urban Arts Festival, seeks to highlight the work of independent film makers and seeks short films under 10 minutes for the SUAFilm Festival. Films must be suitable for all ages. All genres are accepted, including documentary, music video, narrative, animation, experimental.



***APPLICATION BELOW

Festival Deadlines

- Official Deadline: Received by **March 19, 2010**
- Submission Requirements: All films must be RECEIVED by the deadline date.

Festival Location & Dates

- This year's festival will last from April 18-25, 2010 with film screenings throughout.

Submission Requirements Checklist

- ✓ All films must be submitted on DVD. Please do not send film reels or original material.
- ✓ Digital press kit as a PDF and link to Vimeo or Youtube site for your film sent to kgreen@awolinc.org. Please note the name of your film and the word SUAFilm in the email title. Example: "SUAFilm-Sins of the Father"
- ✓ The press kit should include film synopsis, credits, high resolution photos and complete and current contact information.
- ✓ A nonrefundable entry fee of \$10 must be included with your film. Please make check or money order payable to AWOL All Walks of Life, Inc. Credit Card payments can be made through Paypal. Please email Davena-djordan@awolinc.org to receive a Paypal invoice via email.
- ✓ Send film with digital press kit and entry fee to:
SUAFilm Festival
P.O. Box 15846
Savannah, GA 31416
- ✓ FEE WAIVERS: While we understand the costs involved in independent filmmaking, the AWOL uses submission fees to offset the costs of administrating call for entries and can not grant fee waivers.

*Screeners will not be returned. Your images and bio will be used on the SUAF website [www.savannahurbanartsfestival.com], on posters and print materials.

For more information, contact: kgreen@awolinc.org or at 912-303-4987

Please complete this application to be considered for the SUAFilm lineup.

SUAFilm APPLICANT INFORMATION

Film Title: _____

Producer Name: _____

Film Length: _____ Date Completed: _____

Short Synopsis/One Liner: _____

Main Point of Contact: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Email: _____

Myspace, Vimeo, Youtube or Web URL: _____

Crew Info

Director: _____

Writer: _____

Media Release

By agreeing to screen your film, Producer acknowledges that there will be media, photographers, video and other documentation systems on the site and the Savannah Urban Arts Festival and or its organizers cannot be held responsible for the use of any images taken. SUAF reserves the right to use any images and or video it controls for future advertising and promotion with no compensation to the Producer. By signing this application you are agreeing to these terms and this will be understood as your media consent/release documentation.

Authorized Signatory for Producer: X _____

Printed Name: _____

Date: _____

Thank you for completing this Application. This application must be returned along with all requested items no later than

March 19, 2010

Mail To: AWOL All Walks of Life, Inc.

ATTN: SUAFilm

P.O. Box 15846

Savannah, GA 31416

Fax: 912-525-3160