Seventh Annual

Davis Film Festival

GUIDELINES AND ENTRY FORM

The Seventh Annual Davis Film Festival takes place **April 1 - 3, 2010.** We accept works in film or video of any length or genre. Works must have been completed after May 2007.

Submissions are accepted on 1/ 2 inch VHS videotape or DVD only. Please label all work clearly with your name, contact information, title, exhibition format and running time. Cue all tapes to start of program and provide prints with sufficient leader, heads out, ready for projection. The festival cannot be held accountable for faulty or uncued preview tapes.

Final programming decisions will be made by the screening committee in February. All entrants will be notified in writing of the status of their submission by March 1st. If you change your address after submission of work, please inform us.

If selected, an exhibition-quality print of tape in the format you've indicated on the entry form must be made available to the Festival by **March 15, 2010.** Directors should also provide press kits including still photos (300dpi digital photos or photo prints) and brief description, plus any other supporting materials with their submission. This festival is COMPETITIVE.

We will exhibit work on 16mm, 35mm, Beta SP videotape and DVD. Works selected for the Festival will be held through the Festival unless interim return is requested and arranged with the Festival Coordinator. Works which have not been selected for inclusion into the Festival can be arranged for pickup by calling 510-464-5989 or email:
davisfilmfest@gmail.com

Early Deadline: Friday, January 29, 2010.
Final Deadline: Friday, February 26, 2010.

All materials must be submitted together via mail or delivery to:
Davis Film Festival,
920 Cranbrook Court #54
Davis, CA 95616.

Entry fees: $20 per entry early deadline; $25 per entry final deadline. Please make checks payable to Davis Film Festival.

Questions: Call 510-464-5989 or go to www.davisfilmfest.org.

Submitting
Film/Videomaker:_____

Telephone 1___ ___ _____ Telephone 2 ___ ___ _____

E-mail: _____

Address: _____

Title of film/video:_____

Running Time:____:____:____

Circle as applies: Color B/W Sound Silent Narr. Doc. Exp. Other_____

Exhibition Format: 35mm 16mm Beta SP DVD Date of Completion:_____

Director:_____

Producer:_____

Writer:_____DP:_____Editor:_____

Principal Cast:_____