



SPELEO FILM FESTIVAL

Karlovac, 24. September 2016.



APPLICATION FORM

Application deadline: 15.09.2016.

Please send completed application forms by e-mail to: info.speleofilmfestival@gmail.com or by post to:
Osmica Karlovac, Bašćinska cesta 3, 47000 Karlovac, Croatia

ORIGINAL TITLE:			
DURATION:	IN MINUTES	COUNTRY OD ORIGIN:	
AUTHOR(S):			
ADDRESS:		CITY:	
POSTAL CODE:		COUNTRY:	
PHONE/MOBILE NUMBER:		E-MAIL:	
NAME OF ASSOCIATION (CLUB, ORGANIZATION, ETC.):			
ADDRESS:		CITY:	
POSTAL CODE:		COUNTRY:	
PHONE/MOBILE NUMBER:		E-MAIL:	
COPYRIGHTS:			
NAME OF ASSOCIATION (CLUB, ORGANIZATION, ETC.):			

BY ENTERING THE FESTIVAL, AUTHORS GIVE PERMISSION TO PRESENT THEIR FILMS AT THE SPELEO FILM FESTIVAL 2016, AS WELL AS TO USE THEM TO PROMOTE THE FESTIVAL.

FILM SUMMARY:

[Empty box for film summary]

Author's signature:

In, _____, (date) _____ 2016.