

NJISACF, 2010
Fourth New Jersey Independent South Asian Cine Fest (NJISACF)
October 2010

Mail Submission to: **Asian American Film and Theater Project,**
P.O. Box 136, Monmouth Junction, New Jersey, 08852, USA

If you are using courier service, mail to: Sakti Sengupta, 117 Jared Drive,
North Brunswick, New Jersey 08902, USA

SUBMISSION FORM

ORIGINAL TITLE: _____ ENGLISH TITLE (if different): _____

DIRECTOR(S): _____ PRODUCER(S): _____

SUBMITTED BY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP/POSTAL CODE: _____ COUNTRY: _____

PHONE: _____ FAX: _____ E-MAIL: _____

PRINT SOURCE CONTACT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP/POSTAL CODE: _____ COUNTRY: _____

PHONE: _____ FAX: _____ E-MAIL: _____

CATEGORY: Full Length Feature Full Length Documentary Short Feature Short Documentary

SUBMISSION FORMAT: VHS DVD

SHOOTING FORMAT: 16 mm Super 16 mm 35 mm DV OTHER _____

EXHIBITION FORMAT: DVD only

ASPECT RATIO (if shot on FILM): 1:33 1:66 1:85 Scope SOUND: Mono Stereo Digital Dolby

ASPECT RATIO(if shot on VIDEO): 4:3 16:9 OTHER _____ COMPLETION DATE (no earlier than 2004)

COUNTRY(IES) _____ RUNNING TIME _____ LANGUAGE(S) _____

PRESS KIT AVAILABLE (REQUIRED UPON ACCEPTANCE)? Yes No WITH PHOTOS? Yes No

BRIEF DESCRIPTION OF ENTRY: _____

IF SCREENED IN NEW JERSEY, THIS ENTRY WILL BE A:

WORLD PREMIERE NORTH AMERICAN PREMIERE U.S. PREMIERE EAST COAST PREMIERE
 NJ PREMIERE

PREVIOUS FESTIVAL, THEATRICAL & TELEVISION SCREENINGS AND/OR AWARDS:

PARTICIPATION AGREEMENT

I (print name) _____ certify, that I hold all necessary rights for this submission and I have applied to the Fourth New Jersey Independent South Asian Cine Fest (NJISACF) 2010, after reviewing and accepting all terms and conditions of the festival. If my film is accepted at NJISACF 2010, I will not be able to withdraw my film from the festival. I am aware that if accepted, I could not have a screening in New Jersey prior to the screening at NJISACF 2010.

SIGNED _____ **DATE** _____