

The Long Island Gay & Lesbian Film Festival 2015

November 12 - 16, 2015

Entry Form/ Source Contact:
(Please type or print clearly)

English Title/Original Title

Year /Running Time/Country

Foreign Language (must be subtitled in English) _____
English Subtitles: yes no

Work In-progress: yes no
If yes, Scheduled Completion Date _____

Category:
 Narrative Documentary Short
 Music Video Experimental Animation

Distributor/Print Source

Address

City/State/Zip

Phone _____

E-mail _____

Short Synopsis/

Director's Contact Information (If different from print source):

All entries must be received no later than August 1st, 2015 to be considered for the 2015 Film Festival

Format of Exhibition Copy

DVD Blu-Ray On-Line

Website/Location

Password

Theatrical Release

(We cannot screen PAL Formats)

35 mm DCP
 NTSC DVD Blu-Ray

Sound (Film must have optical sound):

Mono Stereo Silent
 Dolby A Dolby SR

Aspect Ratio:

1.33 1.66 1.85
 Scope Other _____

If accepted, will this festival screening be a:

World Premiere US Premiere
 East Coast Premiere N.Y. Premiere
 other _____

Will you permit the use of a 3-minute extract for TV or other promotional purposes? :

yes no

If you wish to have the submission returned to you, please submit an envelope with prepaid postage.

I certify that I have read, understood, and do hereby agree to be bound by the Festival Regulations as described herein, and am authorized to submit this film/video to Long Island Gay & Lesbian Film Festival. Once a film is submitted for entry, it may not be withdrawn

Signature

Date

**Mail your entries (preview copies only may be NTSC DVD, or Blu-Ray) and completed entry form and press kit to...
Long Island Gay and Lesbian Film Festival
Attn. Programming
P.O. Box 360
East Northport, NY 11731**