

SUMMERSCREEN

KINO KIDS SHORT FILM FESTIVAL

SUBMISSION FORM TO BE INCLUDED WITH ALL FILMS
PRINT OUT AND POST WITH DVD'S

Name of Tutor submitting film(s):

Name & Address of school or college:

Telephone Contact & Email:

Film Title 1 _____

Film Title 2 _____

Film Title 3 _____

Film Title 4 _____

Film Title 5 _____

Parent/Guardian name & contact No/email for each submitted film:

1. _____

2. _____

3. _____

4. _____

5. _____

School/College Tutor Signature:

Address to send:

Include submission fee of £4 per film maximum 5 films submitted, post with dvd of film(s) to:
Medb Films Summerscreen, Kino Kids Film Festival, 10-11 Nelson Crescent, Ramsgate, Kent. CT11 9JF
Deadline for receiving dvd's post marked by 31st July.