

MovieFest 2022

Movie Detail Form

(Please print and tick appropriate boxes)

Ref No.

Name:
(school name, group name, team name)

Contact Name:

Contact Address:
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.....

Contact Email:

Contact Phone / Fax:

Category: Primary School Secondary School Hobbyist Length (Max 5 Minutes)

Producer's Name:

Male Female Age

Address:
.....
.....

Phone / Fax:

Mobile:

Email:

Director's Name:

Male Female Age

Address:
.....
.....

Phone / Fax:

Mobile:

Email:

Writer/s:

Cinematographer:

Sound Designer:

Composer:

Editor:

Editing system used:

Camera/s:

Cast:
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.....
.....
.....

Please fill in this form and send with your movie to:

MovieFest Charitable Trust
84 High Street
Dannevirke

This movie detail form and your movie must arrive at our address prior to 5pm, 9 September 2022 to be eligible. A separate form must be supplied with each movie entered.