

## SHORTS SUBMISSION FORM

(Please fill in this form in ENGLISH – CAPITAL LETTERS)

### I. FILM INFORMATION

Category:  FICTION  DOCUMENTARY  ANIMATION

Original Title: \_\_\_\_\_

English Title: \_\_\_\_\_ Chinese Title (if applicable): \_\_\_\_\_

Spoken Language: \_\_\_\_\_ Duration: \_\_\_\_\_ min \_\_\_\_\_ sec

Genre: \_\_\_\_\_ Completion Year and Month: \_\_\_\_\_

Filming Location: \_\_\_\_\_ Country of Production: \_\_\_\_\_

Is it a student film?  No  Yes

Is the film about Macau?  No  Yes

Is it subtitled in ENGLISH?  No  Yes, hardcoded  Yes, with a subtitle file

Does the film contain any third-party audio or visual materials?  No  Yes

If it does, are the materials fully authorized to use?  No  Yes

### II. DIRECTOR'S INFORMATION (if there are two or more directors, please mention in the attached biography)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Country: \_\_\_\_\_ Chinese Name (if applicable): \_\_\_\_\_

Gender:  Male  Female

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Website: \_\_\_\_\_

Address: \_\_\_\_\_

Holder of Macau Resident ID (BIR) / Non-resident Worker's ID (blue card) / Authorization to Stay - Student Type

Phone no. in Macau: \_\_\_\_\_ Address in Macau: \_\_\_\_\_

### III. CONTACT INFORMATION (please skip this part if the contact is the director)

Position:  Producer  Representative / Agency  Others: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Country: \_\_\_\_\_ Chinese Name (if applicable): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Before submitting, please ensure your short film is in the required format mentioned in our REGULATION and submit together with the following three items in ENGLISH: 1) Brief Synopsis 2) Brief Director's Biography 3) Production Credits including **Cinematography, Editing, Original Music, Sound Design, Visual Effect.**

By signing this form I, \_\_\_\_\_, the undersigned, declare that all the information above is true and that I have read and agreed with the REGULATION of the MACAU INTERNATIONAL SHORT FILM FESTIVAL.

\* I  agree /  do not agree the exhibition of my short film on TDM (Macau broadcaster) after the Festival; and my contact information to be passed onto TDM for contact purposes only.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

MACAU INTERNATIONAL SHORT FILM FESTIVAL 2021

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