

**Everett Women's Film Festival
Film Entry Application**



P. O. BOX 1185 / EVERETT WA 98206
WWW.EVERETTFILMFEST.COM
INFO@EVERETTFILMFEST.COM

Submit Entry Form & either a VHS or DVD copy of your film along with a check for \$25.00, payable to the **Everett Women's Film Festival** no later than October 15th, 2007

Everett Women's Film Festival
P.O. Box 1185
Everett, WA 98206

General Information

Film Title: _____
Director/Filmmaker: _____
Submitted by: _____
Address (Street): _____
City: _____ State: _____ County: _____ Zip: _____
Phone Number: _____ Fax Number: _____
E-Mail: _____
Is this your first film? ___Y ___N
Is this a student film? ___Y ___N

Film Information

Category: ___ Dramatic Feature ___ Documentary Short
 ___ Documentary Feature ___ Animation
 ___ Dramatic Short ___ Other _____

Screening: ___ Beta sp ___ 35mm
 ___ Mini dv ___ VHS
 ___ DVD ___ DigiBeta (preferred)
 ___ Other _____

Running Time: _____
How did you hear about the EWFF? _____

