

**San Francisco International New Concept Film Festival
Entry Form**

Please type or print clearly. Fill out all sections completely. Download on-line at
www.sfnewfilms.com .

E-mail: sfnewfilmentry@gmail.com

Film title in

English _____

Original Foreign Title (If Different)

Country of Origin _____ **Running Time (TRT)**

_____ **((Min)**

Year Complete _____ **(MM/DD/YEAR)** **Primary Language of Dialogue or**

Narration _____

If not English, check one: Subtitled in English _____ **No dialogue or**

Narration _____

Brief

Synopsis _____

Film Link (Must be YouTube, Youku or Vimeo)

Genre: _____ Feature ___ Documentary _____ Short Narrative _____ Short

Documentary ___ ANM _____ MTV/Music _____ Commercial _____ Script Writing

_____ Video Blog

Contact Information:

Director (Or Screenwriter): First Name _____ Last

Name _____

E-mail _____ WeiChat ID _____

Phone _____

Address _____ City _____

State _____

Zip Code _____

Country _____

Producer: First Name _____ Last

Name _____

E-mail _____ WeiChat ID _____ Phone

Address _____ City _____

State _____

Zip Code _____

Country _____

Entry Fee (Deadline: 7/31/2020. Special Extension: 8/31/2020):

Feature & Documentary (60 min–120 min) :

__\$50 (By 12/31/19) __\$70 (By 3/31/20) __\$80 (By 5/31/20) __\$90 (By 6/30/20)
__\$100 (By 7/31/20) __\$120 (Late Reg by 8/31/20)

● **Short Film (Under 59 min):**

__\$40 (By 12/31/19) __\$50 (By 3/31/20) __\$60 (By 5/31/20) __\$70 (By 6/30/20)
__\$80 (By 7/31/20) __\$100 (Late Reg by 8/31/20)

*By signing below, the person submitting the enclosed Entry to SFNCFF indicated that he/she holds all necessary rights for the submission of the Entry and for the granting of all rights granted to SFNCFF herein and that he/she has read, understands and agrees to pay entry fees and granting SFNCFF to exhibit at cinema or edit the submitted films, posters & photos for promotional usage for SFNCFF.

___ Please post my film on website for voting. ___ Please do not post my film on website.

Entrant: Print Name X _____ Signature X _____

Date(MM/DD/YEAR)

Entry Fee Payment:

1. On-Line Payment: www.sfnewfilm.org/film-submission

2. Pay by Check

Note: Check payable to "SFNCFF" with the App Form mail to:

SFNCFF, 561 San Mateo Ave., San Bruno, CA 94066.

3. PayPal Payment: sfnewfilm@gmail.com

4. Transfer to SFNCFF Bank Account :

Chase Bank, JPMorgan Chase Bank, N.A. Swift Code: Chasus33

www.Chase.com

- San Francisco International New Concept Film Festival
- Account: 322271627: 555313779
- Bank address:

Chase Bank,
101 Montgomery St
San Francisco, CA94104
Tel: [415-951-1997](tel:415-951-1997)
