

San Francisco International New Concept Film Festival

旧金山国际新概念电影节

Fashion Show Application Form

时尚秀全球视频云汇演申请表

Please fill-in all the following parts or apply on-line: www.sfnewfilms.com.

请打印或填写清楚以下所有部分。可在www.sfnewfilms.com在线下载此表。网上申请或邮寄。

Applicant or Team Leader 申请人或团队负责人 (独秀或组秀) : **(If Duo Group) Group#** 参演人数: _____

First Name 名 _____ **Last Name** 姓 _____ **Age** 年龄 _____

E-mail 电子邮箱 _____ **Tel** 电话: _____

Address 地址 _____ **City** 城市 _____

State 州/省 _____ **Zip Code** 邮政编码 _____ **Country** 国别 _____

Fashion Show Name 节目名称 (中文或外文) _____

Fashion Show Length 节目时长 _____ (Min分钟)- **Request within 4 minutes.**

Video Link 节目视频链接 (e-mail 节目表演视频链接 in YouTube/Youku/Vimeo) _____

Music (伴奏乐曲) in MP3 File _____

Application /Production Fee (节目制作) 报名费 (**Deadline** 截止时间 : 7/31/2021)

* **Solo Dancer** 独秀: 报名费 \$50

* **Duet/Trio** 双人-三, 四人 秀/报名费 \$80

* **Group over 5** (5人以上组秀) : 报名费 \$100

* **By signing below, the applicant confirmed that he/she holds all necessary rights for the submission of the Entry and for the granting of all rights to SFNCFF herein and that he/she has read, understands and agrees to pay application fees and granting SFNCFF to exhibit on line or on theater publicly or edit the submitted music for promotional usage for SFNCFF. During the preparation, if any injury happens, participants take their own responsibility.**

请在下栏签名。申请人必须拥有所投作品之所有必要权利以提交参赛项目。申请人读懂此条款，理解并同意支付并授予**SFNCFF**所有权以将作品录音录像在电影节网站或影院展示或另行剪辑提交电影节宣传推广使用。

* 参赛者签名: 印刷体 X _____ 签名 X _____ 日期 X _____ (月/日/年)

Applicant(Print) X _____ **Signature** X _____ **Date**

X _____ (M/D/Y)

***Payment: 1. Pay on-line: www.sfnewfilms.com.**

2. PayPal to: sfnewfilm@gmail.com

3. Check payable to "SFNCFF" with the App Form mail to 支票与申请表寄至:

SFNCFF

4479 Mission St., San Francisco, CA 94112.

E-mail:

sfnewfilmentry@gmail.com