

For Téléfilm Canada use: Date Received _____
(Year/Month/Day)



INDUSTRY DEVELOPMENT FESTIVALS AND MARKETS

CONTACT

Project Leader – Festivals and Markets
Telefilm Canada, 360 Saint-Jacques Street, Suite 600
Montréal (Quebec) H2Y 1P6

CANADIAN SELECTION SCREENINGS IN MONTRÉAL

Check the Festival to which you are submitting your film

<input type="checkbox"/> Berlin	<input type="checkbox"/> Karlovy Vary
<input type="checkbox"/> Cannes (specify)	<input type="checkbox"/> Locarno
<input type="checkbox"/> Official Selection	<input type="checkbox"/> Pusan
<input type="checkbox"/> Directors' Fortnight	<input type="checkbox"/> Sundance
<input type="checkbox"/> Critics' Week	<input type="checkbox"/> Venise

FILM INFORMATION

Title: _____

Director: _____

Producer: _____

Production Company: _____

Original Language: _____

Running Time: _____ Month and Year of Completion: _____

If French is the original language, indicate if the film is subtitled in English
(in the case of the Sundance and Pusan screenings)? **Yes No**

The Director's first or second feature? **1st 2nd**

GENRE

Fiction Action/Adventure Animation Comedy Documentary	Drama Essay/Experimental Historical drama Horror	Mystery Musical Romantic comedy Sci/Fi
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Is the film **Completed** or in **Post-production**?

Image calibrated? **Yes No** Sound mixed? **Yes No**

Includes music? **Yes No**

SHOOTING FORMAT

Film 35 mm 16 mm / **Video** HD DV Other: _____

SELECTION FORMAT

Film 35 mm / **Video** Betacam SP DVD Digital
Aspect ratio 1,37 1,66 1,85 scope
Sound Dolby A/SR DTS SRD / **Colour** B/W Colour Both

FORMAT FINAL

Film 35 mm / **Video** Betacam SP HD Digital
Aspect ratio 1,37 1,66 1,85 scope
Sound Dolby A/SR DTS SRD / **Color** B/W Colour Both

If the film is selected for the festival, it will be (check all that apply):

World premiere Internationale premiere	European premiere North American premiere	Asian premiere
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Screenings (festival, theatrical) & broadcasts (TV, web) before the festival:

COPRODUCTION

Is it a coproduction? **Yes No** If yes, **Majority Minority?**
Specify with which country(ies): _____

Did the film receive financing from the Canada Feature Film Fund?

If yes, **Selective** or **Performance** Programme?

Application no.: _____

Halifax Montréal Toronto Vancouver

IDENTIFICATION OF THE APPLICANT

Company Name ("Applicant"): _____

Head Company Name (if different): _____

Address: _____

City, province, postal code: _____

Email: _____ Web address: _____

Tel: _____ Fax: _____

CONTACT PERSON (APPLICANT)

Name : _____ Email: _____

APPLICANT'S RELATIONSHIP TO THE FILM

Producer Director International distributor Other: _____

If the Applicant is not the **INTERNATIONAL DISTRIBUTOR**, specify who is :

_____ City: _____

Foreign territories represented: _____

DIRECTOR

Name: _____

Address: _____

City, province, postal code: _____

Email: _____ Tel: _____ Fax: _____

APPLICANT STATEMENTS

Applicant shall not be in default with respect to any obligation toward Telefilm Canada. The applicant also agrees, after the market screening, to complete any survey(s) required by Telefilm Canada regarding the satisfaction and outcomes of the initiative. These surveys are strictly confidential and are essential performance indicators for Telefilm Canada. Failure to comply with this requirement will limit the applicant's access to the future Telefilm Canada's activities.

TELEFILM CANADA IS SUBJECT TO THE ACCESS TO INFORMATION ACT

The undersigned authorized representative of the applicant and co-applicant (if applicable) hereby:

- authorizes Telefilm Canada to discuss and disclose any information concerning any aspect of the application and/or the film, the applicant and any related party to the applicant, with every entity connected (in Telefilm's opinion) with the application and/or the film, the applicant and any related party to the applicant, including, but not limited to, actual or proposed financial partners, corporate and/or completion guarantors, interim financiers, auditors, legal counsels, the Canadian Television Fund, the Department of Canadian Heritage, CAVCO, CRTC, and other governmental entities (collectively the "Entities"). The applicant further authorizes said Entities to discuss and disclose to Telefilm any information concerning any aspect of the application, and/or the applicant and any related party to the applicant;
 - authorizes Telefilm Canada to disclose on its website any and all information pertaining to the application and/or the film;
 - declares that applicant has not entered into any oral or written agreement or side deal that conflicts with any of the provisions of this application form, the Call for entries, and any other applicable Telefilm Canada's guidelines or business policies;
 - agrees to notify Telefilm Canada immediately if and when any changes occur to any of the submitted documents and shall provide written details of same;
 - declares that the film complies and will continue to comply with the Call for entries, and any other applicable Telefilm Canada's guidelines or business policies;
 - has made and shall make without delay full disclosure to Telefilm Canada of any dispute, and actual or potential litigation in connection with the film;
 - declares that the film is a Canadian Production pursuant to the criteria of the Canadian Audio-visual Certification Office (CAVCO);
 - declares that all persons specified as being Canadian in the application and all accompanying documentation, are Canadians, in accordance with the Investment Canada Act, the Immigration and Refugee Protection Act or the Citizenship Act;
- The applicant must meet Telefilm Canada's deadline (screening material & documentation delivery date). Please refer to the Call for entries for more details.

I, the undersigned, hereby solemnly declare and warrant that the information submitted for this application is accurate, true and complete, and make this solemn declaration knowing that it is of the same force and effect as if made under oath.

Signature : _____

Name : _____

Title : _____

Date : _____

Duly authorized representative of the applicant

FOR RETURN OF YOUR FILM PRINT OR BETACAM

Only Betacams and 35 mm film prints are returned, not DVD copies.

Name of Courier Company: _____

Your account number: _____