



November 4-7 2010

FILMMAKER INFORMATION

Name _____

Address _____

Phone(_____) _____ Cell(_____) _____

E-mail _____

Address _____

Website: _____

Please Check Your Title on this project:

Writer / Producer / Director / Actor/Composer/DP/

ENTRY CATEGORY:

NAME OF PROJECT _____

Digital Film

Feature Short

Documentary Animation trailer

horror film score

WRITTEN WORD:

Feature-length screenplay Short screenplay

LEVEL OF COMPETITION

- professional (budget over \$50,000.00) Novice/amateur/college student (budget under \$50,000.00)
- youth/high school (ultra low or no budget)

HORROR _____

SCIENCE FICTION HORROR _____

Entry Fees: SUBMISSIONS OPEN FEBRUARY 2010

FILM/VIDEO/SCREENPLAYS

Early deadline (ALL EARLY ENTRIES ARE \$25) July 1, 2010 SHORT Films (45 minutes and Under) Feature-length Films (45+ minutes)

SHORT screenplays (UNDER 45 pages) FEATURE-LENGTH screenplays

Regular Deadline August 1, 2010 (ALL REGULAR ENTRIES ARE \$40) SHORT Films (Under 45 minutes) Feature-length Films (45+ minutes)

SHORT screenplays (UNDER 45 pages) FEATURE-LENGTH screenplays (45+ pgs)

WAB Extended deadline September 10, 2010 (ALL LATE ENTRIES ARE \$60)

SHORT Films (45 minutes and Under) Feature-length Films (45+ minutes)

SHORT screenplays (UNDER 45 pages) FEATURE-LENGTH screenplays (45+ pgs)

SUBMISSION CHECK OFF

- LogLine (Under 30 words) Complete Principal Cast/Credits List
- (3) Stills for Festival Program Completed & Signed Entry Form
- e-mail address to confirm receipt of entry
- 2 DVDs (region 1) preview screener
- Entry Fee Filmmaker Bio (Under 100 words)

- 35 mm Film DVD/Video Animation
- Length _____
- Aspect Ratio _____ (4:3) _____ (16:9) Audio- Mono / Stereo
- Project Title _____

- Money Order Check Credit Card Card Type _____
- Card # _____
- Expiration: _____ / _____
- Name on Card _____
- WAB _____
- Signature _____ Date _____ / _____ / _____

Make All Checks and Money Orders Payable to “Salty Horror Film Festival”

OR

PAY directly on the website without Pay Pal using Authorized.net

OR

use Pay Pal account on the Pay Pal site use Mario@saltyhorrorfilmfestival.com

I have read, understood, and complied with the rules and regulations.

To the best of my knowledge, all statements in this document are true.

This film is not subject to any litigation nor is any litigation threatened.

I am duly authorized to submit this film/video/animation to the *Salty Horror Film Festival*.

Should this film win an award I am authorized and or empowered by all parties legally representing this film to designate the following individuals to receive all awards. In the case where no recipient is designated, all prizes will be split equally between the director and the production company.

I understand that the SHFF committee will place my project in the proper category if necessary and I give them the right to use their film, video, promotional materials etc., to promote the SHFF Festival.

Signed: _____ Date _____

PrintName _____ Title _____

**PLEASE SEND FILMS/ENTRIES/FEES/AND MATERIALS TO:
Salty Horror Film Festival
PO Box 3145
Salt Lake City, UT 84110**

Please check the website often to see if your name appears on the page for “RECEIVED BUT NOT YET ACCEPTED”

WWW.SALTYHORRORFILMFESTIVAL.COM