



ELIGIBILITY:

Film is about Sikhs and/or Sikh & Culture
 Projects by Filmmakers of Sikh Origin
 Projects with lead characters of Sikh Origin

FILM TYPE:

Animation	Music Video
Documentary	Short (under 15 mins.)
Full-Length	

CONTACT INFORMATION:

Name:

Address:

City:

State:

Zip:

Country:

Connection to the Movie:

List Other:

Email:

(Please check your email address - we cannot reply to you if your email address is incorrect!)

Office Phone No.:

Mobile Phone No.:

FILM INFORMATION:

Film Title:

Director(s):

Producer(s):

Writer(s):

Film Runtime:

Language:

English Subtitles:

Yes

No

Film Synopsis:

(125 word limit)

TECHNICAL INFORMATION:

SOUND FORMAT:

Stereo
 Dolby A
 Dolby SR
 Other:

SCREENING FORMAT:

DCP (A DVD must be included)
 BluRay (*Preferred*)
 DVD
 Other:

RESOLUTION RECOMMENDATIONS:

- 1080p (Nothing lower than 720p)
- Pro Res 16:9
- Frame Rate: 29.97 FPS or 30 FPS
- Suggested Codec: **H.264**

APPLICATION CHECKLIST:

NO ENTRY FEE!

2 Screener Copies (Blu-Ray or DVD) for Screening Committee or Paste Link Below:

If necessary. Username:

Password:

Film Synopsis (125 words limit).

Photos or stills from the film (high-res images only).

E-Mail above items to info@sikhLens.com

COMPLETED APPLICATION FORM

Films will not be considered unless ALL completed information has been received.

PARTICIPATION AGREEMENT:

This is to certify that I, _____ am applying to the
SikhLens: Sikh Arts & Film Festival after accepting all the terms, conditions and requirements.

I certify that I have all the distribution rights and authority to submit the film.

I certify that my film is eligible for this festival and I am aware of the criteria that applies.

I am aware that if accepted, I will not be able to withdraw my film.

I understand that it is my responsibility to provide, upon acceptance:

- Press Kit
- Film Stills, Production Photos, Posters & Postcards (if available).
- 3 minute trailer for press & industry executives on DVD.
- Screening Masters - Labeled Blu-Rays or DVDs.

I am responsible for all shipping & mailing costs.

If accepted, I will be invited to SikhLens: Sikh Arts & Film Festival Opening Night in Orange, CA.

If accepted, I will receive a full-access pass for the Festival screenings, related parties, panels and discussions.

I allow SikhLens to submit my film to other SikhLens Film Festivals.

If not submitted by October 20th, my film will not be accepted.

SIGNED: _____

(Handwritten or Verified Digital Signature & Date Is Accepted For On-Line Submission)

DATE: _____

Please save and email this completed PDF form to info@sikhLens.com and print and mail to the address below with your submission.

Every field on this form must be completed—if a particular field does not apply type N/A.

For technical questions, please email vmatrisch@fcsinet.com

PLEASE SEND APPLICATION & ALL MATERIALS TO:

SikhLens: Sikh Arts & Film Festival
Film Submission
23800 Via Del Rio
Yorba Linda, CA 92887 USA

CONTACT INFORMATION:

E-mail: info@sikhLens.com
Phone: +1-714-692-9120 ext. 4117
Web: www.sikhLens.com