



Submission Form (*kindly fill ONE submission form for EACH Film*)

Film Title:

English Title

(Include English film title if different)

Running Time: *

Production Date: *

Country(s) of Production:

Original Language: *

If answer above is not English, Does the film have English Subtitles: *

Yes

No

Presentation Format: *

Color

Black & White

Primary Address: *

(Important: Any communication will be officially through this email as the main address)

Director

Name: *

Nationality: *

Address: *

Phone: *

Director Debut* *(Is this the Director's first film?)*

Yes

No

Email Address: *

Producer

Name: *

Nationality: *

Address: *

Phone: *

Email: *

Principal Actors

Brief summary of Film (Synopsis) *Not more than 100words

FESTIVAL DETAILS

Film Classifications:

Feature Length Film (60min+)

Short Film (up to 50min or less)

Documentary (5min+)

Animation (1min+)

Television Drama/ Series (2episodes only)

SUBMISSION CATEGORY: *

Competition (**Awards**)

Non-Competition (**Screening**)

***Screening Format:** 3 copies of film clearly labeled must be availed for the festival and the DVD able to play on domestic DVD players and Soft copy on a flash pen drive.

***Note:** It's Important that you submit your film with posters (both digital and hard copy format A1/A2 size) along with the film trailer.

THE PERSON WHOSE SIGNATURE IS AFFIXED TO THIS SUBMISSION FORM HAS READ AND AGREES TO ABIDE BY ALL REGULATIONS PROVIDED BY UGANDA FILM FESTIVAL

Date: _____

Name: _____

Signature: _____

Kindly fill ONE submission form for EACH Film