



FILM SUBMISSION FORM

Title of film:
Running time:
Date of Submission:
Date of Principal Photography:
Year produced:
Date of Copyright:
Production Company:
Production Company full address :

Contact:
Phone:
Fax :
E-mail :

Writer:
Director:
Producer:

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1. Any Recognizable Names (If yes please list credits) ?
 2. Genre?
 3. Approximate Rating?
 4. Trailer available?
 5. What are the key Selling Points?
 6. Budget?
 7. Logline?
 8. Filmed on (**check one**): 35mm HD(1080p) 16mm Super 16 Video
 other _____
 9. Rights available (**check one**): Domestic International Worldwide
 10. Does the film have a website ? If so what is it ?
 11. Do you have separate audio M&E tracks?
 12. Do you have a NTSC Digital Beta Master available?
 13. Do you have music rights clearance?
 14. Has the film previously been released anywhere in the world (when/where)?
 15. Has this film been to festivals and/or other screenings?
 16. How did you hear about us?
 17. Is there an authored DVD Version available?
 18. What is your asking Price for Distribution:
 19. Aspect Ratio (widescreen or fullscreen):

Send Screeners to:

YORK ENTERTAINMENT
Acquisitions Department
13101 Washington Blvd. Ste 424
Culver City, CA 90066 USA

PLEASE INCLUDE

- **A DVD OF THE FILM**
- **A SYNOPSIS**
- **ANY MARKETING MATERIALS AVAILABLE**
- **THE TRAILER IF AVIALBE**