



**Mail Entries To:**  
 Tampa Bay Jewish Film Festival  
 c/o Dan Sultan  
 13009 Community Campus Drive  
 Tampa, FL 33625-4000

Presenting Sponsor  
**bright house** NETWORKS

Description of Submission:

Title (English): \_\_\_\_\_

Original title: \_\_\_\_\_

Country/countries of origin: \_\_\_\_\_

Language (non-English language films must have English subtitles): \_\_\_\_\_

Running time: \_\_\_\_\_ Completion date (year of film): \_\_\_\_\_

Producer(s): \_\_\_\_\_

Director(s): \_\_\_\_\_

Web Site: \_\_\_\_\_

Press Kit:  Will email  Will mail CD  Will mail hard copies

Type of Film: (check off as many as applicable):

- Comedy  Documentary  Drama  Holocaust
- Romance  Short Films  Youth  Animation
- Jewish Identity – Spiritual  Political – Human Rights, Social Justice

Screener format:

- VHS (NTSC preferred, PAL accepted)  DVD (NTSC preferred, PAL accepted)
- Blu-ray  Media File (.MPG, .WMV, .AVI, .MOV)

Exhibition format:

- 35mm Film  DVD  Beta SP  Other \_\_\_\_\_

Primary contact: \_\_\_\_\_

Title: \_\_\_\_\_

Company/distributor: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, country, zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

I have read and agree to the submission and participation guidelines and certify that I am authorized to submit this film/video to the Tampa Bay Jewish Film Festival.

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date completed: \_\_\_\_\_

Tampa Bay Jewish Film Festival  
 Dan Sultan - Director  
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 813.769.4729 dan.sultan@jewishtampa.com