

## Application Form 2017

Application Form to the 8th edition of the Festival Mirabile Dictu  
International Catholic Film Festival 2017

Complete and print this form and send it to us together with your DVDs. \* Required information. \*Sender Contact Name: \*Rights Holder Name: \*Company name: \*Address 1: \*Address 2: \*City, State, Zip: \*Country: \*Telephone 1: \*Telephone 2/Fax: \*Website: \*Contact email: \*Film category: \*Film title: \*Film genre: \*Film producer: \*Film director: \*Film writer: \*Film cinematographer: \*Film sound/music: \*Film release date: \*Film run-time: \*Film synopsis: \*Film actors: \*Film language: \*Additional information:

I read and understood the Rules and Regulations. Signature, and date.