Mirabile Dictu International Catholic Film Festival

APPLICATION FORM

First Name:

Last Name:

Company name:

Address 1:

Address 2:

City, State, Zip:

Country:

Email address:

Phone:

I declare to be the rights holder of the film below.

Title :

Production Company:

Director:

Scriptwriter:

Genre:

Original Language:

Dubbing/Subtitles:

Main Cast:

Film synopsis:

Signature of the film rights holder: Place and date: