



# Boston's Screaming Ostrich

**Film & Web Media Festival**

**A Film Maker's Festival!**

**Title of Film/Video:** \_\_\_\_\_

**Film/Video Link:** \_\_\_\_\_

**Password (If Necessary):** \_\_\_\_\_

**If Submitting a Disk, DVD or BluRay:** \_\_\_\_\_

**Running Time:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

**Film Rating (R/PG-13/Etc):** \_\_\_\_\_ **Code:** \_\_\_\_\_

To submit works by mail send them to P.O. Box 79072 Belmont MA 02479  
**DO NOT** use FedEx, UPS or any other private carrier. Postal Service only!  
(Include \$30 submission fee)

**Genre:**

<input type="radio"/> Narrative Short	<input type="radio"/> Documentary Short
<input type="radio"/> Animated Short	<input type="radio"/> Horror Short
<input type="radio"/> LGBT Short	<input type="radio"/> SciFi/B Movie Short
<input type="radio"/> Youtube/Streaming Short	

**Exhibition Format:**  DVD  Blu-ray

**NOTE:** If your work is selected you will need to mail us a disk!

**Film Maker/Representative:** \_\_\_\_\_

**Preferred Contact Method:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

I, the undersigned, by submitting this work I am certifying that I have read and understood all rules governing Boston's Screaming Ostrich film festival and to the best of my knowledge all information I have given the festival is accurate and true. I agree to indemnify, hold harmless and to defend the Screaming Ostrich film festival, it's staff, representatives, sponsors and affiliates from all liability, claims and damages connected to my submission and from any fees and expenses, including but not limited to attorney fees, that might be incurred in connection therewith.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_