

LISBON DOCS APPLICATION FORM

Application Deadline: 30 July 2018

Please send the completed form with all required materials to: submit@edn.network

1. Applicant Information:

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Applicant's Role:	<input type="text"/>	Gender:	<input type="text"/>
Experience:	<input type="text"/>		

2. Contact Information:

	Business Address		Home Address* (optional)
Company:	<input type="text"/>		
Street:	<input type="text"/>	Street:	<input type="text"/>
Zip Code & City:	<input type="text"/>	Zip Code & City:	<input type="text"/>
Country:	<input type="text"/>	Country:	<input type="text"/>
Email:	<input type="text"/>	Email:	<input type="text"/>
Phone:	<input type="text"/>	Mobile:	<input type="text"/>
Website:	<input type="text"/>	Skype Name:	<input type="text"/>

* please fill in your home address in case you do not have a business address

3. Project Information:

Project Title:

Production Stage: Format:

Total Budget (€): Film/Series length:

Production Company:

Producer: Cross Media Component:

Director: Genre:

Other Contributors:

Logline:
(max. 100 characters)

Synopsis:
(max. 1000 characters)

Treatment:
(max. 800 characters)

Link to previous work samples (director):

Link to trailer of applicant project:

Intended date of start of principal photography:

Intended delivery date:

Notes on outreach and distribution plan:

Date & Place:

Name:
(please type your first and last name in this field)