

# REGISTRATION FORM



## CATEGORY & SHORT FILM DATA

☐ FICTION      ☐ DOCUMENTARY      ☐ ANIMATION      ☐ EXPERIMENTAL

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
UNIVERSITY/SCHOOL

\_\_\_\_\_  
PRODUCTION YEAR

\_\_\_\_\_  
CITY, REGION/PROVINCE & COUNTRY

\_\_\_\_\_  
ORIGINAL LANGUAGE

\_\_\_\_\_  
SUBTITLES

\*SPANISH OR ENGLISH SUB-  
TITLES MUST BE DELIVERED  
IF ITS ORIGINAL LANGUAGE  
IS NOT SPANISH

*WRITE THE COMPLETE NAME OF THE CREW AND CAST MEMBERS  
IF THE MEMBER IS A STUDENT, MARK THE BOX WITH AN (X).*

### STUDENT

### FILMMAKERS

☐

DIRECTOR: \_\_\_\_\_

☐

PRODUCER: \_\_\_\_\_

☐

WRITER: \_\_\_\_\_

☐

DIR. PHOTOGRAPHY: \_\_\_\_\_

☐

PRODUCTION DESIGN: \_\_\_\_\_

☐

EDITING: \_\_\_\_\_

☐

SOUND DESIGN: \_\_\_\_\_

☐

ANIMATION: \_\_\_\_\_

☐

ORIGINAL MUSIC: \_\_\_\_\_

☐

CAST: \_\_\_\_\_

# REGISTRATION FORM



## DIGITAL FORMAT

### COLOR

- ☐ B/W  
☐ COLOR  
☐ OTHER \_\_\_\_\_

### RECORDING FORMAT

- ☐ 35 MM  
☐ 16 MM  
☐ 8 MM
- ☐ DIGITAL  
☐ OTHER \_\_\_\_\_

*SPECIFY DIGITAL CODEC (DV, MPEG-1, MPG, H.264, HD720, ETC)*

\_\_\_\_\_

## DELIVERY SPECIFICATIONS

*COUNTRY OF ORIGIN* \_\_\_\_\_ *LENGTH (MIN:SEG)* \_\_\_\_\_

- ☐ NTSC  
☐ 4:3  
☐ OTRO \_\_\_\_\_
- ☐ PAL  
☐ 16:9
- ☐ NON-DROP FRAMES  
☐ DROP FRAMES

**FRAME RATE** ☐ 24 FPS ☐ 30 FPS ☐ OTHER \_\_\_\_\_

**AUDIO FORMAT** ☐ 2.0 ☐ 5.0 ☐ 5.1

**AUDIO RATE** ☐ 48KHS ☐ 44.1 KHZ  
☐ 32KHZ ☐ OTHER \_\_\_\_\_

# REGISTRATION FORM



## DELIVERY FORMAT

☐

DVD

☐

DIGITAL FILE (*NOT SEGMENTED IN FILES*)

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## GENERAL INFORMATION

**SYNOPSIS** (*50 WORDS MAX., BLOCK LETTER*)

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## OTHER FESTIVAL ENTRIES

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# REGISTRATION FORM



## DIRECTOR BIOGRAPHY *(50 WORDS MAX., BLOCK LETTER)*

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## DIRECTOR FILMOGRAPHY

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## DIRECTOR

NAME 

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PHONE 

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MOBILE 

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CITY 

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ADRESS 

---

ZIP CODE 

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E-MAIL 

---

# REGISTRATION FORM



## PRODUCER

NAME \_\_\_\_\_

PHONE \_\_\_\_\_

MOBILE \_\_\_\_\_

CITY \_\_\_\_\_

ADRESS \_\_\_\_\_

ZIP CODE \_\_\_\_\_

E-MAIL \_\_\_\_\_

## UNIVERSITY/SCHOOL

NAME \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_

COUNTRY \_\_\_\_\_

## SUBSCRIBER INFORMATION

NAME \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_

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### HOW DID YOU HEAR ABOUT FESTIVAL KINOKI?

☐ PRINTED MATERIAL      ☐ E-MAIL      ☐ UNIVERSITY

☐ WEBSITE      ☐ OTHER \_\_\_\_\_

# REGISTRATION FORM



## LEGAL

*DO YOU OWN THE DISTRIBUTION COPYRIGHTS, MUSICALIZATION AND MARKETING OF THE FILM?*

☐ YES

☐ NO

*DO YOU AUTHORIZE YOUR SHORT FILM BEING EXHIBITED IN OTHER EVENTS AND FESTIVALS IN WHICH KINOKI IS INVOLVED?*

☐ YES

☐ NO

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**REMEMBER TO INCLUDE A COPY OF YOUR SCHOOL ID AND YOUR OFFICIAL ID CARD** (PASS-PORT, IDENTITY CARD, ETC)

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**I HEREBY AGREE WITH ALL THE REGULATIONS PRESENTED IN THE 2015 KINOKI INTERNATIONAL STUDENT FILM FESTIVAL REGULATION FORM AND THIS ENTRY FORM. I CERTIFY THAT ALL THE INFORMATION CONTAINED IN THIS DOCUMENT IS CORRECT.**

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DATE

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NAME & SIGNATURE

# REGISTRATION FORM



## AUTHORIZATION LETTER

THE PURPOSE OF THIS DOCUMENT IS THE UNLIMITED AND FREE AUTHORIZATION BY \_\_\_\_\_ (AUTHOR) WHO IS FROM \_\_\_\_\_ (COUNTRY), RESIDING AT \_\_\_\_\_ AND WHO IDENTIFIES WITH \_\_\_\_\_ (OFFICIAL ID), AT THE UNIVERSIDAD IBEROAMERICANA A.C. (UIA), FOR THE REPRODUCTION OF THE SHORT FILM CALLED \_\_\_\_\_ (SHORT FILM TITLE) IN THE KINOKI FILM FESTIVAL.

THAT AUTHORIZATION INCLUDES ALL THE RIGHTS OF EXPLOITATION, REPRODUCTION, USE, DISSEMINATION, DISTRIBUTION, TRANSMISSION, PUBLIC COMMUNICATION, AND AS WELL ANY OTHER LAW REFERRED TO THE FEDERAL LAW OF COPYRIGHT, WHICH ARE NECESSARY FOR THE PARTIAL OR TOTAL USE OF THE SHORT FILM IN ORDER TO PRESENT THE WORK IN DIFFERENT COMPANIES OF MASS MEDIA (PRESS, MAGAZINES, INTERNET, CINEMA, BILLBOARDS, ETC). THIS AUTHORIZATION EXTEND TO THE PURPOSES THAT UIA THINK WOULD BE NECESSARY.

THE AUTHOR STATES UNDER OATH THAT HE OR SHE HAS ALL THE AUTHORIZATIONS, RIGHTS OR LICENCES TO USE IMAGES, MUSIC OR ANY OTHER ELEMENT CONTAINED IN THE SHORT FILM THAT NEEDS COPYRIGHT APPROVAL WHICH ARE PROTECTED BY THIS LAW (LEY FEDERAL DE DERECHOS DE AUTOR). THE AUTHOR MUST REMOVE ANY KIND OF SITUATIONS THAT COULD HARM THE UIA, THEIR REPRESENTATIVES, EMPLOYEES, OR ANY MEMBER FROM THIS INSTITUTION, IN ANY CASE THAT THERE IS A COPYRIGHT VIOLATION STATED IN THE "LEY FEDERAL DE DERECHOS DE AUTOR", "LEY DE PROPIEDAD INDUSTRIAL" AND ANY OTHER APPLICABLE LEGAL PROVISIONS.

THIS AUTHORIZATION WILL REMAIN IN FORCE INDEFINITELY.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
COUNTRY CITY DAY MONTH YEAR

\_\_\_\_\_  
**AUTHOR**

NAME & SIGNATURE