

## VOLUME SUBMISSION FORM

(Please fill in this form in ENGLISH – CAPITAL LETTERS)

### I. MUSIC VIDEO INFORMATION

English Title: \_\_\_\_\_ Chinese Title (if applicable): \_\_\_\_\_

Language: \_\_\_\_\_ Duration: \_\_\_\_\_ min \_\_\_\_\_ sec

Completion Year and Month: \_\_\_\_\_ Country of Production: \_\_\_\_\_

Is the song listed on our FESTIVAL website?  No  Yes

If the song is not listed on the FESTIVAL website, please provide **the information of the Band**:

Name of the Song: \_\_\_\_\_

Band's Name in English: \_\_\_\_\_ in Chinese (if applicable): \_\_\_\_\_

Name of the Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Is any member in the Band a holder of Macau Resident ID/Non-resident Worker's ID?  No  Yes

Is the song fully authorized to use in the Music Video?  No  Yes

### II. DIRECTOR'S INFORMATION (If there are two or more directors, please mention in the attached biography)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Country: \_\_\_\_\_ Chinese Name (if applicable): \_\_\_\_\_

Gender:  Male  Female Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Website: \_\_\_\_\_

### III. CONTACT INFORMATION (please skip this part if the contact is the director)

Position:  Producer  Representative / Agency  Others: \_\_\_\_\_

English Name: \_\_\_\_\_ Chinese Name (if applicable): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Before submitting, please ensure your music video is in the required format mentioned in our REGULATION and submit together with the following items in ENGLISH: 1) Brief Director's Biography, 2) Production Credits

**If the song is not listed on the FESTIVAL website, please provide** 3) Brief Band's Biography, 4) Original lyrics and its translation in English, 5) a copy of Macau Resident ID (BIR) / Non-resident Worker's ID (Blue Card) of a Band member.

By signing this form I, \_\_\_\_\_, the undersigned, declare that all the information above is true and that I have read and agreed with the regulation of the MACAU INTERNATIONAL SHORT FILM FESTIVAL.

\* I  agree /  do not agree the exhibition of my short film on TDM (Macau broadcaster) after the Festival; and my contact information to be passed onto TDM for contact purposes only.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

MACAU INTERNATIONAL SHORT FILM FESTIVAL 2020

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