

SILVER SPRINGS INTERNATIONAL FILM FESTIVAL
JUMP/CUT
FILM CHALLENGE
2017 ENTRY FORM

* Required

Name of Director/Team Leader * _____

School (if applicable) _____

Address * _____

Cell Phone * _____ Alternate Phone * _____

Email Address * _____

Entry Fee Agreement

By completing and submitting this entry form I, and my teammates, agree to all terms, guidelines and conditions of the *2017 JUMP/CUT Film Challenge* at the *Silver Springs International Film Festival*, presented by the *Ocala Film Foundation*. To complete our submission, I will remit my team's non-refundable entry fee of \$25 to the Ocala Film Foundation directly through the official website at www.JumpCutChallenge.com directly through our website at www.JumpCutChallenge.com, or by check or money order by USPS or in person by midnight, Wednesday, February 15, 2017 (Entry Fee, Entry Form and Team Agreement must all be received before entry is considered complete – no late submissions will be accepted). I understand that a limited number of teams will be chosen at random and that submitting this entry form does not guarantee my team a space. I understand that if my team is selected, I must submit all fees through the official website at www.JumpCutChallenge.com; check or money order by USPS to the Ocala Film Foundation at the address below, or in person to Angie Lewis State Farm Insurance at the address below; the balance of the participation fee within seven business days of notification of my team's acceptance. Team participation fees:

- \$75 for current students
- \$125 for all others

Your application will be officially complete once you submit the \$25 Entry Fee, Entry Form and Team Agreement. Please pay using or remit a check or money order made payable to Ocala Film Foundation to:

- USPS Submissions, mail your Entry Form, Payment, and Participant's Agreement to:
Ocala Film Foundation
3512 East Silver Springs Boulevard
Ocala, FL 34470
- In-Person Submissions, deliver your Entry Form, Payment and Participant's Agreement to:
Angie Lewis State Farm Insurance
416 East Fort King Street
Ocala, FL 34471

Only teams who have completed all paperwork and submitted all fees will be allowed to participate. I understand that my signed Team Agreement must be submitted with this entry form to be eligible for consideration to participate in the Project.

By checking this box, I acknowledge that I, and my team, have read the above statements and will comply with the terms, guidelines and conditions of the JUMP/CUT Film Challenge. *

Signature _____ Date ____ / ____ / ____

Team Roster

Please submit your current Team Roster, to the best of your knowledge, below - your roster may change, up until the actual event. You will be required to submit a complete and current roster at the start of the challenge. You will also be required to submit release forms for all team participants, including talent, with your finished film/video. With the names of your team members, please include their anticipated roles in the production (i.e., director, producer, writer, editor, sound, camera operator, etc.)

Director/Team Leader Name * _____

This team member is the director. Previous SSIFF Filmmaker/Attendee? *

Team Member Name *	Role	Previous SSIFF Participant
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>

How did you hear about the 2017 JUMP-CUT Film Challenge? *

- Online Search *If so, which search engine?* _____
- The Silver Springs International Film Festival Website
- The Silver Springs International Film Festival Facebook Page
- Advertisement *If so, where was the ad?* _____
- Through a Friend
- Email
- Other *Please tell us who/how?* _____

