



Adams Lake Indian Band

## Secwepemc Language Film Festival.

### Applicant Information

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

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City Prov Postal Code

Contact Phone: (    ) \_\_\_\_\_ Community : \_\_\_\_\_

### Information about Film Submission

Please Provide details of the Film you are submitting.

**Film Title:** \_\_\_\_\_

**Producer:** \_\_\_\_\_

**Year** \_\_\_\_\_

**Summary Description**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Category

- Elder                       Youth
- Adult                       Community

#### Duration

- Length of Film \_\_\_\_\_

#### Names of Participants in film

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Format of Film Submission

- USB                       Youtube
- DVD                       Other: \_\_\_\_\_

Submission Deadline by: February 21<sup>st</sup>, 2018