



Application Form

Name _____

Address _____

City _____ State _____

Zip _____

Phone _____

Email _____

Film Title: _____

Length: _____

Listings of other Festivals, Exhibitions, Broadcasts, Awards, etc:

Please include a one-sheet filmmaker bio and synopsis of the short film, copy of film on DVD and send to:

**TvFILM
WMHT TV
4 Global View
Troy, NY 12180**



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