

SUBMISSION FORM

Please include with
film and mail to:

C-47: Georgia Short
Film Showcase
Education Division
Georgia Public Broadcasting
260 14th Street NW
Atlanta, GA 30318-5360

Name: _____

Address: _____

Phone: _____ Email: _____

Title of Film: _____

Running Time: _____ Format: _____

Description: _____

Do you certify that this is an original work of your
own production and clear of any copyright disputes?

(if not clear, please list why.) _____

Please list primary cast and crew details: _____
