**Submission Form**

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| Rep Name: | | Click here to enter text. | | | | | Date: | | Click to pick a date. |
| Occupation: | | Click here to enter text. | | | Phone: | | Click here to enter text. | | |
| Email: | | Click here to enter text. | | | Website: | | Click here to enter text. | | |
| Company Name: | | Click here to enter text. | | | | | | | |
| Company Address: | | Click here to enter text. | | | | | | | |
| City: | | Click here to enter text. | | | State/Prov: | | Click here to enter text. | | |
| Zip/Postcode: | | Click here to enter text. | | | Country: | | Click here to enter text. | | |
| Entry Fee: | | Entry Fee CAD$200 | | | | | | | |
| **Film:** | | | | | | | | | |
| Film English Title: | | Click here to enter text. | | Film Original Title: | | | | Click here to enter text. | |
| Published Country: | | Click here to enter text. | | Published Date: | | | | Click to pick a date. | |
| Original Language: | | Click here to enter text. | | Subtitle Language: | | | | Click here to enter text. | |
| Film Media Format: (1920x1080p, NTSC) | | | MOV  MP4 | | | | | | |
| Premiere: | | World Premiere  North America Premiere  Canadian Premiere  China Premiere  None | | | | | | | |
| Production Date: | | Click to pick a date. | | Premiere Date: | | Click to pick a date. | | | |
| Premiere Location: | | Click here to enter text. | | | | | | | |
| Film Awarded: | | Click here to enter text. | | | | | | | |
| **The Director:** | | | | | | | | | |
| Director’s Name: | Click here to enter text. | | | | Nationality: | | Click here to enter text. | | |
| Phone: | Click here to enter text. | | | | E-mail: | | Click here to enter text. | | |
| Director’s Filmography: | Click here to enter text. | | | | | | | | |

**Submission Form (continued)**

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| **Production Company Info:** | | | |
| Company Name: | Click here to enter text. | | |
| Company Address: | Click here to enter text. | | |
| City: | Click here to enter text. | State/Prov: | Click here to enter text. |
| Zip/Postcode: | Click here to enter text. | Country: | Click here to enter text. |
| Contact Name: | Click here to enter text. | Phone: | Click here to enter text. |
| E-mail: | Click here to enter text. | Website: | Click here to enter text. |
| Producer: | Click here to enter text. | Scriptwriter: | Click here to enter text. |
| Cinematographer: | Click here to enter text. | Visual Effect: | Click here to enter text. |
| Film Editing: | Click here to enter text. | Composer: | Click here to enter text. |



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| **The Leading Actor：** | | | |
| Name: | Click here to enter text. | Nationality: | Click here to enter text. |
| Phone: | Click here to enter text. | E-mail: | Click here to enter text. |
| Filmography & Awards | Click here to enter text. | | |

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| --- | --- | --- | --- |
| **The Leading Actress:** | | | |
| Name: | Click here to enter text. | Nationality: | Click here to enter text. |
| Phone: | Click here to enter text. | E-mail: | Click here to enter text. |
| Filmography & Awards | Click here to enter text. | | |

**Submission Form (continued)**

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| **Submission Categories (choose one only)** |
| Cinema Films  Online Films  Short Films  Documentaries  Creative Films  TV Show  Original Screenplays  (Creative Films include Operas, Children's Films, Cartoon) |

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| **Brief Synopsis of the film（up to 150 words）：** |
| Click here to enter text. |

**Submission Form (continued)**

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| **Agreement** | |
| 1. The film delivery party has the copyright of this film and promises to send the film to the Canadian Golden Maple International Film Festival. If a legal dispute arises due to copyright issues, the representative of the filming party shall bear the relevant legal responsibilities. 2. If the film is selected, the relevant materials can be published in the promotional materials of the Canadian Golden Maple International Film Festival and its official website. 3. The film delivery party must provide separately the final film and trailer in MOV or MP4 format by sending a cloud share link and password to info@cgmcanada.com for CGMFF to download them) so that the film and trailer can be screened at the screening venue and platform designated by the Canadian Golden Maple International Film Festival. 4. The film delivery party must provide at least one vertical poster in digital format JPG/JEPG ro PNG for the film submitted. 5. The film delivery party must fill the electronic Submission Form, sign and/or seal, and return both of the electronic version that has been filled and the scanned version with signature and/or seal to the email address of Canada Golden Maple Film Festival Organizing Committee: info@cgmcanada.com. 6. The film delivery party must send the receipt of the entry fee (scanned/photo/screenshot) to the email address of Canada Golden Maple Film Festival Organizing Committee: info@cgmcanada.com. 7. The film should be made in recent three years 8. The agreement will take effect after the completion of 3/4/5/6/7 of this agreement. | |
| Signed and Sealed by the film delivery party: | Signature: Seal:  Date: Click to pick a date.  The filming delivery party agrees to and implements the above agreement once the form was signed and sealed. |

**Canada Golden Maple Film Festival Organizing Committee**

Email: info@cgmcanada.com

Website: www.cgmcanada.com

**Submission Fee Payment Info**

**Submission fee can be paid by one of the following methods:**

1. **Register and login on CGM official website (www.cgmcanada.com) to pay by credit card in Canadian Dollar.**

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1. **Bank transfer or wire transfer in Canadian Dollar：**

Payee Name：**Canada Golden Maple Film Festival Society**

Payee Address：**8811 Lansdowne Road, Richmond, BC V6X 3T4 Canada**

Payee Bank Name：**The Toronto Dominion Bank**

Payee Bank Address： **3779 Sexsmith Road, Suite 2100, Richmond, BC V6X 3Z9 CANADA**

Payee Bank Code (Institute #)：**004**

Payee Bank Branch Code (Transit #)：**09713**

Payee Account No.：**5254278**

Payee Bank SWIFT CODE: **TDOMCATTTOR**

1. **WeChat Pay in RMB:**

Scan the following QR code with your WeChat, Alipay or UnionPay App and enter $200 to pay.



**NOTE：** Please MUST enter the film name that you submitted and the name and phone number of the representative in the payment’s NOTE/Remark/Comment field, for the CGM Committee to recognize and match with your submission, otherwise your submission will be delayed.