



Santa Fe Indian Market

SOUTHWESTERN ASSOCIATION FOR INDIAN ARTS

Class X: Moving Images Application

Application & Fee Deadline: Must Be Received by Friday, June 9, 2017

1. PERSON SUBMITTING APPLICATION Please Type or Print Clearly

Last Name: _____ First: _____ Middle: _____

Production Company (if applicable): _____

Address: _____ City: _____ State: _____ Zip: _____

Home #: _____ Mobile #: _____ Email: _____

Submitter's relationship to the film _____

2. PRODUCTION INFORMATION The Applicant Must Be An Enrolled Member Of A Federally Recognized US Or Canadian Tribe

Who is the rights-holder to the film: _____

Director:

Last Name: _____ First: _____ Middle: _____

Tribe/Nation: _____ Tribal Enrollment #: _____

Producer:

Last Name: _____ First: _____ Middle: _____

Tribe/Nation: _____ Tribal Enrollment #: _____

Writer:

Last Name: _____ First: _____ Middle: _____

Tribe/Nation: _____ Tribal Enrollment #: _____

Other Part of Creative Team, Position: _____

Last Name: _____ First: _____ Middle: _____

Tribe/Nation: _____ Tribal Enrollment #: _____

Principle Actors: Name: _____ Name: _____

Name: _____ Name: _____

3. SUBMISSION All Entries Must Have Been Completed Within The Past Three (3) Years.

- Animation Short (animated by any means) Narrative Short (fiction) Music Video Feature
 Documentary Short (nonfiction) Experimental Short (new creative uses of film/video; techniques, and form)

Title of Film/Video: _____

Year Completed: _____ Running Time: _____ Country of Production: _____

Format: (we can only project in digital formats) DVD BLURAY

4. PROJECT INFO

Was this project submitted to other competitions or festivals? Yes No

If yes, which one(s)?

For promotional purposes, if your film receives any awards, would its screening be a:

World Premiere North American Premiere US Premiere Santa Fe

Premiere Please provide a short synopsis of film (attach separate sheets if necessary)

5. APPLICATION FEE PAYMENT

Entry Fee Each individual applicant must include a \$25 fee.

Applications must be received by Friday, June 9, 2016.

We do not accept cash or personal/business checks.

Please make funds payable to SWAIA.

Payment Cashier's check# _____ Money Order# _____

Credit Card Type: Visa Mastercard American Express

Credit Card #: _____ Expiration date: _____ CSC code: _____

Name as it appears on card: _____

Signature of cardholder approving charge: _____

6. SIGN YOUR APPLICATION

Please read the following statement and sign below:

I have read this statement and I agree to abide by SWAIA's Indian Market Standards and rules. I also agree to allow SWAIA to show my entries both during the jury process and, if selected, to the public at official SWAIA events and after Indian Market through the Calendar year. SWAIA will not make copies, distribute or have un- authorized showing of my work. My signature indicates that my application is true and complete.

Signature: _____

Date: _____