



Application form / Prijavnica

Movie Title / Naslov filma:

Director(s) / Autor(i):

Genre / Žanr:

Running time / Vrijeme trajanja:

Year of production / Godina:

Awards / Nagrade:

YouTube* Trailer link:

e-mail:

Adress, City / Ulica, Grad:

Country / Zemlja:

Phone number / Tel.:

Plot / Radnja:

Please print and send your application with the film. One copy of this application submit by e-mail. Submission of a film and signature represents agreement with the regulations of Trash Film Festival.

Udruga Trash
"za Trash Film Festival"
P.P. 13
42001 Varaždin
CROATIA

Molimo Vas da prijavnica pošaljete zajedno s filmom. Kopiju prijavnice pošaljite mailom. Potpis autora ili producenta na festivalskoj prijavnici, znači prihvaćanje svih navedenih točaka pravilnika TRASH FILM FESTIVALA.

I Agree / Prihvaćam

Signature / Potpis
