

**NATIONAL FESTIVAL TOUR 08/09  
PROGRAM RENTAL REQUEST FORM**

**CONTACT INFORMATION**

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ORGANIZATION/SCHOOL: \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

HOW DID YOU HEAR ABOUT THE TOUR? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SCREENING INFORMATION**

PROGRAMS REQUESTED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SCREENING DATE/S & TIME/S: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SCREENING PURPOSE: \_\_\_\_\_

\_\_\_\_\_

DO YOU NEED TEACHING MATERIALS?      Y      N

DO YOU NEED PRESS OR MARKETING MATERIALS?      Y      N

WILL YOU HAVE A PANEL/DISCUSSION AFTER THE SCREENING?      Y      N

ARE YOU INTERESTED IN HAVING A FILMMAKER ATTEND THE SCREENING?      Y      N

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**FOR OFFICE USE ONLY**

Price: \_\_\_\_\_ Invoice No.: \_\_\_\_\_ Format: \_\_\_\_\_ Initials: \_\_\_\_\_