



ASSOCIATION CINÉMAS ET CULTURES D'AFRIQUE

REGISTRATION FORM

TECHNICAL & ARTISTIC INFORMATION :

Original title :

Director (s) :

Country :

Year :

Documentary

Fiction

Animation

Other

Digital version :

Duration :

Colour

Black & white

Languages :

Subtitles:

DIRECTOR INFORMATION :

Name and surname:

Nationality:

Email adress:

Phone number :

Mobile phone :



ASSOCIATION CINÉMAS ET CULTURES D'AFRIQUE

Adress :

PRODUCER INFORMATION :

Email adress :

Phone number :

Adress :

DISTRIBUTOR INFORMATION :

Email adress:

Phone number:

Adress :

Thank you to join us a document presenting the synopsis, a photo of the film and some biographic elements about the director. Please fill in a viewing link (write it below) or any other medium allowing the viewing of the film (USB key, DVD...).

All subscriptions accept the rules enclosed.

Viewing link :

Password :