



MEDIA CREDENTIAL APPLICATION

2007 Austin Film Festival

October 11-18, 2007

Please complete one application per person including electronic crew members

The following documents are required with your completed application:

- A letter, on company letterhead, from your editor/producer assigning you to cover the Austin Film Festival. Please include a brief description of the aspects of the Festival you are interested in covering.
- A recent copy of the publication or program you represent. Please include circulation information.
- If you have covered AFF in the past, please include a copy of the piece.

CONTACT INFORMATION

Name: _____ Title: _____

Address: _____

City, State/Country, Zip Code: _____

Telephone: (Office) _____ (Home) _____ Fax: _____

E-mail: _____ Dates Attending: _____

PUBLICATION/ OUTLET INFORMATION

Primary Publication/Outlet: _____ Market: _____

Media Type: _____ Frequency: _____ Circulation: _____

Editor/Producer: _____ Telephone: _____

Address (if different than above): _____

Additional Publication/Outlet: _____ Circulation: _____

Additional Publication/Outlet: _____ Circulation: _____

SPECIAL INTERESTS

Please select any categories on which you would like to receive specific information:

- | | | |
|---|--|--|
| <input type="checkbox"/> African-American | <input type="checkbox"/> Film & Food Party | <input type="checkbox"/> Music in Film |
| <input type="checkbox"/> Native American | <input type="checkbox"/> Short Films | <input type="checkbox"/> Screenplays |
| <input type="checkbox"/> Asian-American | <input type="checkbox"/> Documentary Films | <input type="checkbox"/> Teleplays |
| <input type="checkbox"/> Writers Ranch | <input type="checkbox"/> Student Films | <input type="checkbox"/> Screenwriters |
| <input type="checkbox"/> Young Filmmakers Program | <input type="checkbox"/> International Films | <input type="checkbox"/> Conference |
| | <input type="checkbox"/> Women in Film | <input type="checkbox"/> Other _____ |

TYPE OF COVERAGE

Briefly Describe Stories and Length of Coverage

AS A CONDITION OF RECEIVING CREDENTIALS TO THE 2007 AUSTIN FILM FESTIVAL, I AGREE TO SEND TEAR SHEETS OR A COPY OF MY COVERAGE AS SOON AS POSSIBLE FOLLOWING THE FESTIVAL.

BY SUBMITTING THIS SIGNED APPLICATION FORM I AGREE TO NOT RECORD ANY FILMS, PANELS OR Q&As DURING THE 2007 AUSTIN FILM FESTIVAL, OCTOBER 11-18th,2007. NO RECORDING DEVICES OF ANY KIND ARE PERMITTED IN THE THEATERS OR IN THE PANELS.

Applicant's Signature _____ Date _____

PLEASE RETURN THIS FORM BY MONDAY, SEPTEMBER 11, 2007, TO:

Austin Film Festival, Attn: Linnea Toney, 1145 West 5th St Suite 210., Austin, TX 78703

Phone: 512.478.4795 / Fax: 512.478.6205

YOU WILL BE NOTIFIED OF YOUR CREDENTIALS STATUS BY SEPTEMBER 18th, 2007