CALL FOR SUBMISSIONS - QUEER CITY CINEMA FILM FESTIVAL

Deadline for submissions - May 1

Queer City Cinema Film Festival programs contemporary, recent, and historically relevant film. Because of the relatively small scale of the festival in programming terms, Queer City Cinema Film Festival favours short and shorter film works to satisfy the mandate for maximum representation. Feature length works are represented in small numbers. Experimental, conceptual, difficult/risk taking, and provocative media artworks are of special interest to Queer City Cinema. Film programming seeks to include screenings with Queer, Trans, and BIPOC (Black, Indigenous, Persons Of Color) content. Dramatic shorts, docs, animation and experimental works are screened that continue a legacy of breaking down barriers - representing daring and unchartered visual territory, humorous and subversive characters, otherworldly and fantastical places and images, pleasurable provocations, and challenging and insightful perspectives on identity in a world all to ready to oppose and oppress.

Please include the following info and documents with each submission:

- Completed and signed submission form
- · film stills

ELECTRONIC SUBMISSIONS TO: projects@gcitycinema.ca

Attention: Gary Varro - Artistic Director

There is no submission fee.

If you would like to make contact prior to your submission, please email projects@qcitycinema.ca with subject line QCC Film Festival - Submissions

Notification of inclusion in Queer City Cinema will be made by the end of July

SUBMISSION FORM PLEASE PRINT OR TYPE CLEARLY.

English title:

Original title:	
Director(s):	
Producer(s):	
	Year completed:
Original Language	
Duration/Running time:	
Synopsis	
	
If accepted, this will be a premiere in: Pegin	na Saskatchewan CanadaWorld
Previous screenings	a Saskatchewan Canadawond
1 Tevious screenings	
Subtitled DubbedOriginal_	Exhibition
formats	
Distributor? Yes No Self Print so	ource (for festival catalogue):
Producer/Distributor:	
Contact Name (First, Last):	
	City:
Province/State:	Country:

Postal/zip code:		
Telephone:		
Email:		
Website:		<u> </u>
Director contact info (if diffe	rent from print source contact):	
First name:		
Address:		City:
Province/State:	Country:	
Postal/zip code:	Telephone:	
Email:		
Category (check all that ap	oly): Fiction Documentary Ex	perimentalAnimation
I have read and agree to th	e festival submission and participatio	on in Queer City Cinema Film Festival and
that all the above information	on is correct.	
Signed:		