



Filmorder

Please order at least 4 weeks in advance.

Title of Film	Format	Screening dates	

Borrower (invoice recipient)

Customer Number:			
Name / Institution:			
Street:			
Address:			
Telephone Number:		Fax:	
e-mail:			

Address of Delivery (if different)

Name / Institution:			
Street:			
Address:			
Telephone Number:		Fax:	

Notes concerning the Event

Co-Organizer (if any)			
Location of the Event			
Number of Places		Price of Entrance:	
Character of the Event			

We hereby state that we will not modify the copy in any way, especially not to splice / couple the film.

Due to technical reasons, we ask for a permission to splice / couple the copy.

The borrower is responsible for shipment round-trip.

Invoice has to be paid at least 14 days before screening

We have read and accepted the conditions of hire

Date

Name in Blockletters

Signature / Company Stamp