



Official Entry Form

2010 Z Fest Film Festival Application

Email this form to margiez@zsyst.com Fax to 952-974-3141 or mail to address below.

All applications must be received by 6:00 pm on 2/1/2010. All scripts must be received by 6:00 pm on 2/15/2010.

Script Title: _____ Script Genre: _____

Team Name: _____

Team Leader: _____ Email/ Facebook: _____

Street Address: _____

Phone: _____ City: _____ State: _____ Zip: _____

Other Team Members: _____ Email/Facebook: _____

Other Team Members: _____ Email/Facebook: _____

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Other Team Members: _____ Email/Facebook: _____

Please feel free to continue info on back. You may add or remove team members after submitting your application if necessary.

\$50.00 Festival Entry Payment Information

Visa Master Card American Express Discover Card

PayPal Check Cash at Z Systems

Credit Card Payments:

Name on Card: _____ Card number: _____

Phone number: _____ Expiration Date: _____ CVV 3 digit code: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Signature: _____

Send PayPal Payments to: johnz@zsyst.com. Be sure to include your **Team Name** and **Your Name** in the message:

Mail your check to: Z Systems, inc.
Attention: Margie Zdechlik
3742 Oregon Avenue South
St.Louis Park, MN 55426-4339

Office Use Only:
Team Number _____
Check Number: _____
Paid Cash/ Receipt # _____