

# 2005 AMIA ARCHIVAL SCREENING NIGHT

AMIA Conference  
Paramount Theatre, Austin, Tx  
Saturday, December 2, 2005

The AMIA Archival Screening Night provides conference participants with an opportunity to showcase recent acquisitions and preservation efforts. In 2005, this event will (tentatively) start at 6:30pm. Conference participants interested in submitting material for screening should complete this form and send it via fax or mail to the Screening Night Coordinator, Katie Trainor, at the address indicated. All submission forms must be faxed or postmarked by **Monday, October 31st**. Screening Night participants will be contacted after this date to confirm their participation.

## Can anyone submit a film to the Archival Screening Night?

If you are showing material as part of any other screening or panel during the conference, we ask you not to submit that piece to the Screening Night. Due to the increasing length of Screening Night, it is possible that not all pieces submitted will be included in the program. **Priority will be given to material from institutions which are newcomers to Screening Night and which do not have the opportunity to exhibit materials elsewhere in the Conference Program.**

## CRITERIA

1. New preservation work.
2. Footage from new discoveries or acquisitions of historical interest.
3. Each screening entry must not exceed **6 min**. This includes the intro of the material by the presenter.
4. No submission will be accepted that serves as promotional material for your organization.

## SUBMISSION FORM

The following information must be **completely** filled out as requested. Please fax / email / mail the following submission form page to:

Katie Trainor  
AMIA Archival Screening Night  
2828 29<sup>th</sup> Street  
Astoria, NY 11102  
Email: [katrainor@ifccenter.com](mailto:katrainor@ifccenter.com)  
Or Fax to the AMIA Office at 323.463.1506

# 2005 AMIA ARCHIVAL SCREENING NIGHT

## Submission Form

FAX, MAIL OR EMAIL THIS FORM TO: Katie Trainor by October 31st , 2005

Name:

Institution / Affiliation:

Address:

City/ State/ Province/ Zip Code /Country:

Telephone:

Email address:

Presenter at Screening Night:

The following formats will be accommodated: 35mm, VHS, Beta SP and DVD. Please provide details of the material you wish to screen in the space provided:

**FILM / VIDEO:** (Please circle)      35mm      VHS      Beta SP      DVD

**Duration** \_\_\_\_\_ **Sound /Silent**\_\_\_\_\_ **Aspect ratio (film and video)**\_\_\_\_\_

**Description: Please briefly describe your submission as you would like it to appear in the screening night brochure ( 50 words or less) Also indicate as to whether or not the material you are submitting may be offensive to others or graphic in content.**