

Kan-Kan Cinema - Screening Proposal Form

Thank you for your interest in presenting a screening at Kan-Kan Cinema. Please complete all sections. Submission does not guarantee booking. Proposals are reviewed monthly.

1. Contact Information

Full Name: _____ Organization (if applicable): _____

Role (filmmaker / distributor / educator / organization / individual / company): _____

Email: _____ Phone: _____ Website or social media: _____

2. Type of Request

- | | |
|--|---|
| <input type="checkbox"/> Kan-Kan programs a film you are recommending | <input type="checkbox"/> Screening of a film you made |
| <input type="checkbox"/> Screening of a film you represent (rights holder) | <input type="checkbox"/> Community/partner event tied to a film |
| <input type="checkbox"/> Private or ticketed rental event | <input type="checkbox"/> Festival or multi-film event |

Are you primarily requesting:

- Kan-Kan to curate and host A collaborative event A venue rental

3. Film Information

Film Title: _____ Director: _____

Year of Release: _____ Country of Origin: _____ Runtime: _____

Language(s): _____ Subtitle Availability: _____

Available Format: DCP Blu-ray Digital File (ProRes/MP4) Streaming Link Only

Trailer Link: _____

Viewing Link (required): _____

Distributor: _____ Self-distributed / Individually owned

I confirm I hold the legal right to publicly exhibit this film or can secure permission.

4. About the Film – *Please add an additional page if needed to answer the following questions.*

Short synopsis: _____

Why do you want to screen this film at Kan-Kan? _____

What audience do you believe will attend? _____

Has the film been screened publicly before? Where? _____

Are any guests (director/cast/speakers) able to attend? _____

5. Audience & Promotion

Do you have an existing audience/community? Yes No

If yes, please describe: _____

Estimated Attendance: Under 35 35-45 45-75 75-145

How will you help promote the event?

Email list Social media following Partner organizations Press/outreach No promotion plans

6. Financial Structure

Are you seeking: Standard theatrical booking Revenue share Reduced rental fee

Full rental Not sure / seeking guidance

Are you able to pay a rental fee if required? Yes Possibly No

Tickets will be: Free Paid. Do you want the ticketing to be done through Kan-Kan? Yes No

7. **Scheduling** Preferred month/timeframe: _____

Flexible dates? Yes No Is the event tied to a specific date? If yes, explain: _____

8. Operational Needs

Q&A or panel discussion Microphones Livestreaming/Zoom Vendor tables Merchandise sales

Other special setup needs: _____

9. Community & Mission Connection

Why do you believe this screening belongs at Kan-Kan Cinema? Connections (check all that apply):

Local community issue Education Arts collaboration Underrepresented voices

Cultural organization

10. Acknowledgement

I understand submission does not guarantee acceptance.

I understand additional technical and licensing requirements may apply.

I understand Kan-Kan reviews proposals on a scheduled basis.

11. **Signature** _____ **Date** _____