



## Application Form for Promote My Movie

Name of the movie :

Role	Name	Phone number	Email id
Producer			
Director			
Cinematographer			
Editor			
Music Director			
Assistant Director			
VFX			
Hero			
Heroine			
Other actors:			
1)			
2)			
3)			
4)			

I hereby allow LittleShows.com to promote my movie as per their procedures. I allow LittleShows.com to screen my movie on their website , promote on facebook and any other online or offline media.

Signature  
(Producer / Director)

Signature  
(Admin - LittleShows)

For Office Use only :

Date :

Registration Number :

Note: This form must be submitted during the coverage session. This will be considered as mandatory ticket.