



## Movie Collaboration Request

### Sponsoring Organization Information

Organization Name:

Recognized Student Organization:

Contact Person:

Leadership Position within Organization:

Phone:

Email:

### Film Information:

Film Title:

Brief Description of Film: (Please try to include Distributor Information)

### Reservation Details:

Proposed Venue for Screening:

Proposed Screening Date and times:

Alternative Screening Dates times:

Have you already booked McKissick Theater for this event?

Will your organization be able to assist with the cost of securing the public performance rights and technical fees? If so, How much?

Will this even be presented in connection with any other events (lecturers, panel discussions, thematic festivals, etc.)?

Any other information that we should know?

**Publicity**

Specifically, how does your organization plan to publicize this movie collaboration to your organization and the student body?

What do you request of ClemsonLiVE in terms of publicity?

Who is the target audience for this movie collaboration?

How many people do you expect to attend this event from your organization? In total?

**I have read and agree to the ClemsonLiVE Movie Collaboration Event Policies:**

**Signature:**

**Date:**

**ClemsonLiVE USE:**

**Date Received:**

**Date Discussed:**

**Approved**

**Not Approved**

**More Discussion Needed**

**Date Group Informed of Decision:**

**Medium of Notification:** Letter / Email / Phone / In-Person

**ATTACH LETTER TO ORGANIZATION TO THIS APPLICATION**