



**FOOTAGE REQUEST FORM**

**RETURN VIA FAX TO 203-406-2530**

**ATTN: LICENSING**

**LICENSEE'S DETAILS**

Contact Name \_\_\_\_\_  
Contact Title \_\_\_\_\_  
Full name of Organization \_\_\_\_\_  
Full Postal Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_ Website \_\_\_\_\_

**INVOICING DETAILS**

Contact Name \_\_\_\_\_  
Contact Title \_\_\_\_\_  
Full name of Organization \_\_\_\_\_  
Full Postal Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_ Website \_\_\_\_\_

**DESCRIPTION OF REQUESTED FOOTAGE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROJECT INFORMATION**

**Program Title:** \_\_\_\_\_

**Usage:** (include a description of the program)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Broadcaster which will telecast the Program:** \_\_\_\_\_

\*\*please note it is a common practice for Versus logo and graphics to be included on all footage.



**RIGHTS REQUIRED**

**Media of Exhibition: (Check all that apply)**

- Terrestrial
- Cable
- Satellite
- Video on demand
- Home video
- Radio
- Theatrical (cinema)
- In Flight
- Educational
- Entertainment
- Internet website
- Broadband network
- Closed Circuit/In Store

**Requested Term:** Start \_\_\_\_\_ End \_\_\_\_\_

**Requested Territory:** \_\_\_\_\_

**Duration of Footage to be used:** \_\_\_\_\_

**Initial Telecast Date:** \_\_\_\_\_

**MATERIAL REQUIREMENTS:**

**Format Required: (check)**

- VHS
- Beta SP
- Digital Beta
- DVD

\*\*Please note that Versus only provides NTSC standard

**Shipping Details (if different than above):**

Contact Name \_\_\_\_\_  
 Contact Title \_\_\_\_\_  
 Full name of Organization \_\_\_\_\_  
 Full Postal Address \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail \_\_\_\_\_ Website \_\_\_\_\_

Requested Method of Shipping: \_\_\_\_\_

Account Number: \_\_\_\_\_