

24th Annual GEMINI Awards (2008-2009)

Please use this checklist to ensure that your entry is complete and includes all required materials. For a complete explanation of any entry requirements see the 24th Annual Gemini Rules & Regulations Book. You can submit this form and supporting materials by email to geminis@academy.ca. Please include all necessary PDF, Word doc, Jpegs and synopses for your entry and use the title of your production in the subject line. Please ensure that a signed copy of the signature page of your Entry form is either included with your dvds and betas or is scanned and sent to geminis@academy.ca.

Entry Requirements

N/A *Notes*

Entry Form is complete and signed by authorized individual (see definitions)	<input type="checkbox"/>	<input type="checkbox"/>	
Current Home addresses, phone numbers and phonetic spelling for all individuals entered.	<input type="checkbox"/>	<input type="checkbox"/>	
One DVD of the program for the program category entered. For Series entries, TWO episodes on DVD to represent the series.	<input type="checkbox"/>	<input type="checkbox"/>	
One DVD of the program for EACH craft category entered.	<input type="checkbox"/>	<input type="checkbox"/>	
One Beta SP/digiBeta copy of the entered program is included. (1 of each episode entered for series entries)	<input type="checkbox"/>	<input type="checkbox"/>	
Best Cross Platform entries are accompanied by a short video or a text description with screen shots as visual support to demonstrate how their project works.	<input type="checkbox"/>	<input type="checkbox"/>	
Best Achievement in Title Design entries are accompanied by a text description and a creative description	<input type="checkbox"/>	<input type="checkbox"/>	
Performers' entries are cued and include a cue sheet. (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Head shots of each entered performer are included.	<input type="checkbox"/>	<input type="checkbox"/>	
Music entries are accompanied by a detailed music cue sheet (SOCAN format or similar).	<input type="checkbox"/>	<input type="checkbox"/>	
Visual Effects entries are accompanied by a three page description	<input type="checkbox"/>	<input type="checkbox"/>	
Production Design entries accompanied by a one page description.	<input type="checkbox"/>	<input type="checkbox"/>	
Costume Design entries accompanied by a one page description.	<input type="checkbox"/>	<input type="checkbox"/>	
Make-Up entries accompanied by a one page description.	<input type="checkbox"/>	<input type="checkbox"/>	
Letter of confirmation of original broadcast date from broadcaster.	<input type="checkbox"/>	<input type="checkbox"/>	
Copy of CRTC or CAVCO certification.	<input type="checkbox"/>	<input type="checkbox"/>	
Synopsis for program (OR generic synopsis for series entries) not to exceed 60 words.	<input type="checkbox"/>	<input type="checkbox"/>	
Series entries: synopsis for each episode entered, not to exceed 30 words.	<input type="checkbox"/>	<input type="checkbox"/>	
On-screen credit list for each episode/ program entered, signed on each page by authorized individual.	<input type="checkbox"/>	<input type="checkbox"/>	
Complete Press Kit or EPK(see definitions)	<input type="checkbox"/>	<input type="checkbox"/>	
Two self-addressed return mailing labels (if fee paid for returning tapes)	<input type="checkbox"/>	<input type="checkbox"/>	
All relevant entry fees are enclosed.	<input type="checkbox"/>	<input type="checkbox"/>	
Fee for returning tapes included (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
ZIP.ca permission form for online streaming during voting process Reference Page 21in the Rules & Regulations	<input type="checkbox"/>	<input type="checkbox"/>	

CRAFT CATEGORIES (2001-9100) cont

Category #: _____ Series Episode (name and #): _____ Broadcast Date: _____
Award Recipient: _____ On-Screen Credit: _____ Broadcast Time: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Phone: () _____ Fax: () _____ E-Mail: _____

Category #: _____ Series Episode (name and #): _____ Broadcast Date: _____
Award Recipient: _____ On-Screen Credit: _____ Broadcast Time: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Phone: () _____ Fax: () _____ E-Mail: _____

Category #: _____ Series Episode (name and #): _____ Broadcast Date: _____
Award Recipient: _____ On-Screen Credit: _____ Broadcast Time: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Phone: () _____ Fax: () _____ E-Mail: _____

PROGRAMMING SEGMENTS (9001-9003) Please specify length of segment and length of program in spaces provided. Please use page 3 for additional entrants.

Category #: _____ Series Episode: _____ Broadcast Date: _____
Length of segment: _____ Length of program: _____ Broadcast Time: _____
Award Recipient: _____ Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone: () _____ Fax: () _____ E-Mail: _____

Category #: _____ Series Episode: _____ Broadcast Date: _____
Length of segment: _____ Length of program: _____ Broadcast Time: _____
Award Recipient: _____ Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone: () _____ Fax: () _____ E-Mail: _____

PERFORMANCE CATEGORIES (9501-9529)

Please Note: Compilations may be submitted for 9509 and 9510 (see pg. 12) and for 9517, 9519-9522, 9524-9527 and 9529 (see pg. 13)

Category #: _____ Series Episode (name and #): _____
Broadcast Date 1: _____ Broadcast Time 1: _____ Broadcast Date 2: _____ Broadcast Time 2: _____
Award Recipient: _____ Role/On-Screen Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Home: () _____ Fax: () _____
Agent's Name: _____ Agent's Phone: _____

Category #: _____ Series Episode (name and #): _____
Broadcast Date 1: _____ Broadcast Time 1: _____ Broadcast Date 2: _____ Broadcast Time 2: _____
Award Recipient: _____ Role/On-Screen Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Home: () _____ Fax: () _____
Agent's Name: _____ Agent's Phone: _____

Category #: _____ Series Episode (name and #): _____
Broadcast Date 1: _____ Broadcast Time 1: _____ Broadcast Date 2: _____ Broadcast Time 2: _____
Broadcast Date 3: _____ Broadcast Time 3: _____
Award Recipient: _____ Role/On-Screen Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Home: () _____ Fax: () _____
Agent's Name: _____ Agent's Phone: _____

Category #: _____ Series Episode (name and #): _____
Broadcast Date 1: _____ Broadcast Time 1: _____ Broadcast Date 2: _____ Broadcast Time 2: _____
Broadcast Date 3: _____ Broadcast Time 3: _____
Award Recipient: _____ Role/On-Screen Credit: _____
Phonetic Spelling: _____
Address: _____ City: _____ Province: _____ Postal Code: _____
Country: _____ Home: () _____ Fax: () _____

An Additional Entrant is an additional member of a team entry from Pages 1-3. An Additional Category is a NEW craft/performance category.

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

Category #: _____ Additional Entrant Additional Category
 Series Episode (name and #): _____ Broadcast Date: _____ Broadcast Time: _____
 Name: _____ Role/On-Screen Credit: _____
 Phonetic Spelling: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Country: _____ Home: () Fax: ()
 Agent's Name: _____ Agent's Phone: _____

The following information is used for CONTACT purposes ONLY. The individuals listed below are NOT ENTRANTS.

PRODUCER: _____ CURRENT COMPANY: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Phone: () _____ Fax: () _____ E-Mail: _____

EXECUTIVE PRODUCER: _____ CURRENT COMPANY: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Phone: () _____ Fax: () _____ E-Mail: _____

ORIGINAL PRODUCING COMPANY OF ENTERED PROGRAM (if different from above):
 Company Name: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Phone: () _____ Fax: () _____ E-Mail: _____

CONTACT PERSON FOR THIS ENTRY: _____
 Address: _____ City: _____ Province: _____ Postal Code: _____
 Phone: () _____ Fax: () _____ E-Mail: _____

CO-PRODUCTIONS Please list all co-production companies.

Names _____

Declaration

I hereby certify that:

1. The undersigned has read the Rules and Regulations for the 24th Annual Gemini Awards.
2. The information provided within this application is complete and accurate.
3. The undersigned represents and warrants to the Academy that is has obtained all necessary rights and permissions required to transfer, and the undersigned hereby does transfer to the Academy, the right, in perpetuity, to incorporate clips of this Entry in a television program and to televise or otherwise exploit the program worldwide (with or without soundtrack, including musical score), to show any portion of this Entry to Academy members as considered necessary, to show any portion of this Entry during the Awards presentation, to transfer clips of this Entry (with or without soundtrack, including musical score and including video clips, audio clips and/or still images) to an interactive storage device (including CD-ROM) or to the Academy web site on the World Wide Web, to otherwise use clips of the Entry for promotional purposes for the enhancement of the image of Canadian television and to transfer those rights to a third party for the aforesaid purposes. All of the foregoing rights are transferred by the undersigned to the Academy for use in connection with the current Gemini Awards Show and future Gemini Awards Shows. The undersigned hereby agrees to indemnify the Academy from any loss or damage suffered by the Academy arising from the transfer of rights including any branch of the undersigned's representation and warranty relating to such transfer.
4. The undersigned owns the production or is authorized in writing by the owner to submit this Entry.
5. The undersigned HAS NOTIFIED ALL INDIVIDUALS HEREIN ENTERED as potential nominees that they have been entered and has provided all said individuals with copies of this entry form.
6. Broadcaster produced programs (i.e. produced 100% in-house) warrant that they meet the criteria of CRTC/CAVCO requirements by signing below.

NAME OF AUTHORIZED INDIVIDUALS (see Definitions):

SIGNATURE: _____
 TITLE: _____

NAME OF PRODUCTION COMPANY: _____
 DATE: _____

FEE TOTAL

<i>Single Program Category and up to 2 Craft Categories</i>			
Member.....	\$470.00	Non-Member.....	\$620.00
			\$ _____
<i>Series Program Category and up to 2 Craft Categories</i>			
Member.....	\$620.00	Non-Member.....	\$770.00
			\$ _____
<i>Best Cross Platform Program Category</i>			
Member.....	\$350.00	Non-Member.....	\$500.00
			\$ _____
<i>Each Craft/Performance Category</i>			
Member.....	\$155.00	Non-Member.....	\$305.00
			\$ _____

Tape Return Shipping and Handling Fee for BetaSP/DigiBeta (\$11.00 first tape, \$6.00 each additional tape) \$ _____

TOTAL ENTRY FEES ENCLOSED: \$ _____

Payment Method Visa MasterCard Cheque

Name on Card: _____

Card Number: _____

Expiry Date: _____

Signature for Credit Card: _____

For Office use only: Credit Authorization _____