

Application Form

DATE: / /

【Applicant】

Organization Name		
Name of Representative	Position:	Name:
Organization's Address		
Organization's Website		
Contact Person Name	Position:	Name:
Email Address		

【Required footage and photos】

	footage and Photo Titles	Scene Content	Request
1			<input type="checkbox"/> Video <input type="checkbox"/> Photo
2			<input type="checkbox"/> Video <input type="checkbox"/> Photo
3			<input type="checkbox"/> Video <input type="checkbox"/> Photo
4			<input type="checkbox"/> Video <input type="checkbox"/> Photo
5			<input type="checkbox"/> Video <input type="checkbox"/> Photo

【Details of Use】

Program/Event /Project Title	
Platform	<input type="checkbox"/> TV <input type="checkbox"/> Streaming (e.g.Netflix) Please specify. () <input type="checkbox"/> Internet <input type="checkbox"/> Printed Media <input type="checkbox"/> Screening <input type="checkbox"/> Others()
Term	Start Date: / / ~ End date: / / ※ KTV does not grant perpetuity rights. The maximum 5 year term is renewable
Territory	<input type="checkbox"/> One country <input type="checkbox"/> Worldwide including Japan <input type="checkbox"/> Worldwide excluding Japan <input type="checkbox"/> Others()
Purpose	※In what context will the footage be used?
Preferred File Format	<input type="checkbox"/> MXF <input type="checkbox"/> QuickTime File (H.264) <input type="checkbox"/> QuickTime File (Apple ProRes 422 [HQ]) <input type="checkbox"/> Others Please specify. ()