**Billing Address**

Institution:

Contact:

Address:

City / State / Zip Code:

Country (if outside the US):

Telephone:

Email:

Fax:

**Shipping Address**

Institution:

Contact:

Address:

City / State / Zip Code:

Country (if outside the US):

Telephone:

Email:

Fax:

**Number of Screenings:**

**Screening Date(s):**

**Preferred Shipping Service**

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

Or

UPS (charges will appear on invoice)

**Payment information**

Visa Or Mastercard

Account #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration date \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_

Or Invoice PO#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title of Film**

**Artist**

**Format**

In addition to rental & shipping charges, a handling charge of $10 for the first title and $2 for each additional title will apply. Please note all titles now rent for a minimum of **$35** per title. International renters should note additional rental cost, shipping & insurance requirements: <http://film-makerscoop.com/rentals-sales/rental-policy>. Return this form via email [filmmakerscoop@gmail.com](mailto:filmmakerscoop@gmail.com) or via fax (212-267-5666). Visit our website at [www.film-makerscoop.com](http://www.film-makerscoop.com) for our contact information & rental & sales policies. **If paying by check please make payment out to: The New American Cinema Group, Inc.** There is an additional fee for credit card transactions.