



BUENOS AIRES ROJO SANGRE

Festival Internacional de Cine de terror, fantástico y bizarro

Note to send scanned to materialbars@gmail.com with additional material requested in the regulations

XX FESTIVAL BUENOS AIRES ROJO SANGRE
Autorization

In my role as Producer/Director of _____,
I authorize the projection of the mentioned film in XX **Buenos Aires Rojo Sangre Film Festival**, to be held in date to be set between *November-December 2019* on Buenos Aires City, Argentina.

Complete name and sign:

Mail:

Telephone:

Date:
