

## Footage request form

Please fill in and send back to: Footage@paralympic.org

\*Mandatory fields

## **Shipping Information**

Name*	
E-mail*	
Organisation*	
Address*	
City*	
State	
Zip code*	
Country*	
Phone	
Billing Information	
VAT number*	
☐ Same as Shipping Information	
Name*	
E-mail*	
Organisation*	
Address*	
City*	
State	
Zip code*	
Country*	
Phone	



## Footage details

Who will be the licensee?*	
How many minutes of Paralympic footage do you want to use?	
The state of the s	
What Paralympic footage do you request? (Athlete, competition, sport, year)*	
What production would the Paralympic footage be used in? (Promotional video, exhibition,	
documentary)	
How would the footage be broadcasted? (TV, internet, film festival, DVD)	
In which territories would the production be broadcasted?	
How many times would the footage be broadcasted?	
When would the footage be broadcasted for the first time?	
How long do you want the license rights for? (normal license validity period is 1 year, possibility to extend	
to 5 years or perpetuity with extra fees)	
What format do you want the footage in?	

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