

Midwest Productions – Film Transfer Order Form

Please complete this form and include with your order. If shipping order in multiple boxes, please include a copy of this form in each box.

CONTACT INFORMATION:		
Name:		
Address:		
City:	State:	_ Zip:
Phone: (day) Phone:		(eve)
Cell Phone: Email:		
FILM TYPE:	☐ Super8 S	ound
FILM INFORMATION: Number of reels Are reels numbered? Yes _ No _ (FILM FORMATS MUST BE KEPT TOGETHER)		
We will splice 50 foot reels onto new plastic reels. Your film will be returned. Would you like the old (empty) reels and/or boxes returned? Yes \square No \square		
TRANSFER FORMAT: STANDARD DEFINITION ☐ HIGH DEFINIT	ION 🗌	
DVD ☐ (Standard Definition) Blu-ray ☐ (High Definition)	FILE 🗌	
FILE TYPE: MP4 H.264 (High Definition) DV.AVI (Standard Definition) PRORES 422 (High Definition) Grass Valley HQX (High Definition)		
☐ WILL PROVIDE EXTERNAL HARD DRIVE		
BACKGROUND MUSIC: YES (Stock Easy Listening Music will be added FREE) NONE		
MAIN TITLE/FILE NAME:		
PLEASE PRINT		
<u>ADDITIONAL TITLES:</u> If you would like titles between reels, please <u>type</u> on separate sheet the title and reel number title should be inserted in front of. (Additional charges will apply)		
ADDITIONAL COPIES: Duplicates from the digital masters can be made and format of additional copies:	for an additional	fee. Please indicate number
Number DVD Number Blu-ray Other		Number
Payment type: Money Order Cashiers Check Check (Requires 14 day clear period.) Credit Card: Master Card Visa American Express Discover		

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