

MyMovieTransfer.com Order form for 8mm/Super8/16mm LOW COST Film Transfer

Please print & complete this order form. Return it along with your film & check to:
Payment by check is highly appreciated & helps us keep prices low.

Debenham Media Group 416 Mill St. Coraopolis, PA 15108

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Part 1: Film Transfer Flat rate pricing : \$8.99 per 50 foot units or 3 inch reels

I have _____ 8mm 50 foot reels of positive silent film x \$8.99 per 50' Reel-- \$ _____

I have _____ Feet of 16mm of positive silent film x \$0.12 per foot----- \$ _____

Optional: Second pass film cleaning (any size order) add \$20 ----- \$ _____

Second pass film cleaning removes an additional 10-15% of surface dirt from film before scanning.

Part 2: Recording Media (ALL Media recorded at 30 film frames per second)

Each DVD and MiniDV Digital master tape holds up to 2 hours of film.

2 hours of 8mm/ super8 film is 28 fifty foot reels (1400 feet), 2 hours of 16mm is 5400 feet

MiniDV Digital Master Tape: I need _____ MiniDV(s) at \$10 each----- \$ _____

*Note: MiniDV master tapes are **Required** for low cost transfers.*

DVD: I need _____ DVD(s) at \$10 each----- \$ _____

Portable 160GB USB hard drive: \$135. Circle .avi for pc or .mov for mac ----- \$ _____

Additional sets of DVDs: _____ copies x _____ DVDs in a set----- \$ _____

Example: 3 copies of a transfer that requires 2 DVDs. 3 x 2 =6 x \$10 per DVD =\$60

Part 3: Return shipping

Flat rate return shipping is just ----- \$10.00

Sent by FedEx Ground with delivery tracking number. Or by USPS for Alaska, Hawaii & International.

Send Signature required, (optional) Add ----- \$ 7.50

Your transfer will not be left unless someone is available to sign for the delivery.

ESTIMATED ORDER TOTAL----- \$ _____

I have read & agree to the Terms & Conditions.

I own the images on this film or am authorized by the copyright holder to duplicate this film.

Signed _____ Date _____

If paying by Visa or MasterCard, please print the following information clearly.

Name on card _____ Card # _____

Expires _____ Security code _____

If billing address is different than address above, please enter it below.

Street address _____ City _____ State _____ Zip _____

Please Make Checks payable to DMG. PA residents must add 7% Sales tax. Please number your film reels in ascending order. We will splice your film onto 13 inch archive reels & transfer the film in the order that you have prescribed. Questions? Call 1-412-264-2526