

2011-2012 YOUNG PLAYWRIGHTS FESTIVAL – **COVER SHEET**
(STAPLE 1 OF THESE TO ONLY 1 COPY OF THE SCRIPT)

PLEASE TYPE OR PRINT

STUDENT INFORMATION (PLEASE NOTE PREFERRED CONTACT METHOD WITH AN *). It is crucial that directors be able to reach you during rehearsals for any questions they may have regarding your script. They will try to reach you at the preferred method you have marked with an *.

NAME _____ SCHOOL _____
HOME STREET NUMBER _____ GRADE _____
CITY _____ STATE _____ ZIP _____ AGE _____
EMAIL ADDRESS _____ HOME PHONE _____
(Please print legibly)

SPONSORING TEACHER INFORMATION (PLEASE NOTE PREFERRED CONTACT METHOD WITH AN *)

NAME _____
EMAIL ADDRESS _____ PHONE _____

TITLE OF PLAY _____

CHECKLIST

- APPLICATION FILLED OUT COMPLETELY AND SIGNED BY PARENT, SPONSORING TEACHER, STUDENT
- SCRIPTS TYPED OR WORD-PROCESSED
- PAGES NUMBERED (Handwritten page numbers are OK)
- SIX (6) COPIES OF SCRIPT
 - ONE COPY OF SCRIPT WITH COVER SHEET AND DESCRIPTION PAGE STAPLED ON TOP
 - FIVE (5) COPIES OF SCRIPT WITH ONLY THE DESCRIPTION PAGE STAPLED ON TOP (THESE 5 COPIES DO NOT INCLUDE NAMES - SCRIPTS ARE ANONYMOUS TO JUDGES)
- SEND ONE STUDENT APPLICANT'S SIX (6) SCRIPTS AND APPLICATION PER ENVELOPE (eg one large 9 x 12 yellow envelope) TO ADDRESS BELOW

I have completed the above checklist:

STUDENT'S SIGNATURE _____ **DATE** _____

MAIL TO: YOUNG PLAYWRIGHTS FESTIVAL
ATTN: MINDA NYQUIST
C/O THE OLD TOWN PLAYHOUSE
148 E. EIGHTH ST.
TRAVERSE CITY, MI 49684

**ALL ENTRIES MUST BE POSTMARKED BY
FRIDAY, December 2, 2011**