ENTRY FORM DUNCAN RAND ONE ACT PLAY FESTIVAL 2019
8th -12th JULY (YOUTH) & 15th – 20th JULY (ADULT)
To be returned together with script(s) and cheque to: Duncan Rand Festival Secretary
MEDWAY LITTLE THEATRE, 256 HIGH STREET ROCHESTER, KENT, ME1 1HY **by 4th May 2019**

GROUP_____YOUTH/ADULT*

DIRECTOR _____PHONE_____

ADDRESS_____

EMAIL_____

PLAY TITLE_____

AUTHOR_____

APPROX RUNNING TIME (MAX 50 MINUTES MIN 20)_____Mins

COMEDY* / DRAMA* / OTHER*…….. ORIGINAL/PUBLISHED* *Please delete as appropriate

PREFERENCES FOR REHEARSAL:……

AND PERFORMANCE**:……

CAST/STAGE CREW Any changes **must** be notified at the Tech Rehearsal.

CAST	**PLAYED BY**
Stage Manager	
Assistant Stage Manager(s)	
Other Crew	
Prompter	
Lighting	
Sound	

NB: PUBLISHED PLAYS REQUIRE A LICENCE TO PERFORM. IF SUBSTANTIAL CUTS OR CHANGES ARE MADE TO THE SCRIPT, PERMISSION FROM THE PUBLISHER IS ALSO REQUIRED. THE ADJUDICATOR MUST BE INFORMED THROUGH THE FESTIVAL SECRETARY OF ANY SUCH CUTS OR CHANGES. PHOTOCOPIES OF PUBLISHED PLAYS ARE NOT PERMITTED EXCEPT AS PER COVERING LETTER. *NO LICENCE = NO PERFORMANCE.*

** DATES YOU PARTICULARLY WANT OR CANNOT DO. PREFERENCES ALLOCATED ON A FIRST COME FIRST SERVED BASIS.

For MLT use only

Script/Cheque Rec'd	Script Forwarded	Tech/Perf Reh Sched sent	Licence Rec'd