ENTRY FORM DUNCAN RAND ONE ACT PLAY FESTIVAL 2020 4th -8th JULY (YOUTH) & 11th - 16th JULY (ADULT)

To be returned together with script(s) and payment to: Duncan Rand Festival Secretary MEDWAY LITTLE THEATRE, 256 HIGH STREET ROCHESTER, KENT, MEI 1HY by 7th May 2022

	TROCHESTER, REAL, MET HIT by 7				
GROUP		_YOUTH/ADULT*			
DIRECTORF	PHONE				
ADDRESS					
EMAIL_					
PLAY TITLE					
AUTHOR		·			
APPROX RUNNING TIME (MAX 50 MINUTES MIN 20)	Mins				
COMEDY* / DRAMA* / OTHER*	ORIGINAL/PUBLISHED* *PI	ease delete as appropriate			
PREFERENCES FOR REHEARSAL:					
AND PERFORMANCE:					
PLEASE INDICATE DATES YOU PARTICULARLY NEED OR CANNOT DO. WHERE POSSIBLE WE WILL TRY TO ACCOMMODATE BUT PLEASE NOTE THAT THIS IS NOT ALWAYS POSSIBLE. YOU SHOULD ALSO MAKE PROVISION TO BE RECALLED TO PERFORM FOR THE GALA NIGHT.					
CAST/STAGE CREW Any changes must be notified at the	Γech Rehearsal. Please use additional sh	eet if needed.			
CAST	PLAYED BY				
C4 M					
Stage Manager Assistant Stage Manager(s)					
Other Crew					
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. Please note that due to GDPR regulations - by entering with this document you also agree to the festival secretary keeping your contact details on file for contact regarding the festival purposes only. ENTRY PAYMENT – Please pay by BACS with the following information					

Account name: Medway Little Theatre **Sort Code**: 09-01-55 Account number: 66013088

Reference: Please use DR and the Name of your Group – abbreviated if necessary

If unable to BACS please make cheques payable to: MEDWAY LITTLE THEATRE

For MLT use only

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