

EMERGING PLAYWRIGHTS FESTIVAL

EVENT JANUARY 19, 2019



201 W Jefferson St • Joliet, IL 60432 • 815-724-3761

www.bicentennialpark.org • bipark@jolietcity.org

Playwright Name (please print) _____

Title of Play _____

Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Phone _____ Email: _____

Parent/Guardian Phone _____ Email: _____

Grade _____ Age _____ School _____

Teacher/Mentor _____

Read and Complete this Checklist

- | | |
|-----------------------------------------------------------------------|--------------------------|
| I am between the ages of 12 and 17 years old | <input type="checkbox"/> |
| I am currently enrolled in eighth grade or high school | <input type="checkbox"/> |
| The play I am submitting is between 10 and 15 pages | <input type="checkbox"/> |
| I am the only writer of this play | <input type="checkbox"/> |
| I have included my name and title on the front page of the script | <input type="checkbox"/> |
| I have provided a separate page with character names and descriptions | <input type="checkbox"/> |
| Each page has been numbered | <input type="checkbox"/> |
| I am enclosing two typed copies of my play with my application | <input type="checkbox"/> |
| A parent or guardian has signed this application | <input type="checkbox"/> |

I HEREBY ASSERT THAT THE ENCLOSED PLAY IS AN **ORIGINAL** WORK signed

Playwright (signature) _____

Date _____

Parent/Guardian (printed) _____

Date _____

Parent/Guardian (signature) _____

Date _____