

PLAY SUBMISSION COVER SHEET

NAME			
PHONE			
EMAIL			
ELIGIBIL	ITY		

- □ I have previously directed at Arts Theatre Cronulla
- □ I have directed elsewhere and my work is known to the Committee
- □ I have completed the Arts Theatre Cronulla 'New Directors' program

SEASON PLACEMENT PREFERENCE

- □ 1st Play
- □ 2nd Play
- □ 3rd Play
- □ 4th Play
- □ No preference

Directors may submit 1, 2 or 3 plays for consideration; plays need not be in order of preference as all submissions will be considered for the next season. Please confirm that rights are available at time of submission.

PLAY OF	NE	
	TITLE	
	PLAYWRIGHT	
	GENRE	
	RIGHTS AVAILABLE Yes/No/Unable to confirm - reason	
PLAY TWO		
	TITLE	
	PLAYWRIGHT	
	GENRE	
	RIGHTS AVAILABLE Yes/No/Unable to confirm - reason	
PLAY THREE		
	TITLE	
	PLAYWRIGHT	
	GENRE	
	RIGHTS AVAILABLE Yes/No/Unable to confirm - reason	



PLAY SUBMISSION PITCH / VISION

The first section is your reason for choosing this play and your vision for the production of the play. The second section is if you envisage any changes/problems to the script in casting, setting or staging. Please note that this pitch is anonymous and must be typed.

PLAY TITLE _____

PLAYWRIGHT

GENRE _____

CAST NUMBERS - M _____ F _____

1. REASON FOR PLAY CHOICE / VISION

2. PROBLEMS ENVISAGED AND SOLUTIONS