



**Dream  
Weavers**

## PLAY/MUSICAL SUBMISSION FORM

DIRECTOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TYPE OF PRODUCTION: (specify one) PLAY/MUSICAL/OTHER : \_\_\_\_\_

TITLE OF PRODUCTION: \_\_\_\_\_ AUTHOR: \_\_\_\_\_

PUBLISHING COMPANY: \_\_\_\_\_ COMPANY WEBSITE: \_\_\_\_\_

SHORT SYNOPSIS: \_\_\_\_\_

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CAST SIZE: \_\_\_\_\_ AGE RANGE: \_\_\_\_\_

PREFERRED TIME OF PRODUCTION: OCTOBER/MARCH/JULY: \_\_\_\_\_

ANTICIPATED REHEARSAL SCHEDULE (day of week, start and finish time): \_\_\_\_\_

PRODUCTION TEAM:

ASSISTANT DIRECTOR: \_\_\_\_\_ MUSIC DIRECTOR: \_\_\_\_\_

CHOREOGRAPHER: \_\_\_\_\_ ACCOMPANIST: \_\_\_\_\_

COSTUME LEAD: \_\_\_\_\_ STAGE MANAGER: \_\_\_\_\_

SOUND TECH: \_\_\_\_\_ LIGHTING: \_\_\_\_\_

PROP MASTER: \_\_\_\_\_ OTHER: \_\_\_\_\_

PLEASE ATTACH THE FOLLOWING WITH YOUR SUBMISSION FORM:

- BUDGET (please include large ticket items, such as projections or backdrop rentals, special effects.,etc.)
- COSTUMING IDEAS/VISION BOARD
- SCENIC DESIGN IDEAS/VISION BOARD

**THANK YOU FOR YOUR INTEREST IN DIRECTING FOR DREAMWEAVERS!**