



# DIRECTOR/PLAY SUBMISSION FORM

**Submission directions:** Please submit the completed Play Submission Form (one for each play submitted), a photocopy of the script when possible, and your resume (if desired) to the CPP Artistic Committee. It is assumed that by submission of this form you are also submitted your name as director. You may send the docs by email to [centralparkplayers@gmail.com](mailto:centralparkplayers@gmail.com) or by mail to CPP, P.O. Box 564, Grand Haven, MI 49417. Attn: Play Submission

**TITLE:** \_\_\_\_\_

**Date Submitted:** \_\_\_\_\_

**WRITTEN by:** \_\_\_\_\_

**Submitted By:** \_\_\_\_\_

**Rights held by:** \_\_\_\_\_

**Phone:** \_(\_\_\_\_) \_\_\_\_\_

**email:** \_\_\_\_\_@\_\_\_\_\_

**GENRE:** \_\_\_\_\_

**Historical / Time Period:** \_\_\_\_\_

**BRIEF Description:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CAST:** (Fill in appropriate numbers)

**Total Number of Cast:**

	<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>
<b>Number</b>				
<b>Age Range</b>				

**Special casting:** (Specify what kind) \_\_\_\_\_

**Roles that can double:** \_\_\_\_\_

**Other casting concerns:** \_\_\_\_\_

**ARTISTIC STAFF:**

(This space does not need to be filled out unless you already have recommendations for positions you would like to fill yourself/bring with you.)

**Musical Director:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**Dance Choreographer:** \_\_\_\_\_

**Orchestra/Band** (Specify what size) \_\_\_\_\_

**PRODUCTION STAFF:** (This space does not need to be filled out unless you already have recommendations for positions you would like to fill yourself/bring with you.)

**Producer:** \_\_\_\_\_

**Lighting Designer:** \_\_\_\_\_

**Stage Manager:** \_\_\_\_\_

**Sound Designer:** \_\_\_\_\_

**Costume Designer:** \_\_\_\_\_

**Make up / Hair Designer:** \_\_\_\_\_

**Set Designer:** \_\_\_\_\_

**Properties:** \_\_\_\_\_

**Technical Requirements:**

(Comment on those needed for this play or your concept of the play)

Unit Set / Number of Settings: \_\_\_\_\_

Geographic Location: \_\_\_\_\_

Brief Description of Set Concerns or Special Requirements:

\_\_\_\_\_

Difficult or Unusual Props? \_\_\_\_\_ (Describe)

Lighting: \_\_\_\_\_

Sound: \_\_\_\_\_

Special Effects: (Describe) or Weapons or Firearms? (How Many? Describe):

\_\_\_\_\_

Other Special Requirements:

\_\_\_\_\_

What is your vision for this production?

\_\_\_\_\_

\_\_\_\_\_

Have you seen this produced before? (Describe)

\_\_\_\_\_

\_\_\_\_\_

If you have done this play before, describe your involvement in that production:

\_\_\_\_\_

\_\_\_\_\_

Why should we do this play?

\_\_\_\_\_

\_\_\_\_\_

What are the drawbacks (if any) of doing this production?

\_\_\_\_\_

\_\_\_\_\_

Do you foresee any unique marketing opportunities with this production?

\_\_\_\_\_

\_\_\_\_\_

Does this play contain any elements that may be "controversial", such as strong language, mature content, smoking, or violence? If so, how will you handle this?

\_\_\_\_\_

Please include any additional information you would like to include with your application here:

\_\_\_\_\_

\_\_\_\_\_