

8 Minute Madness Playwright Festival 2012 Application

Deadline: Monday November 14, 2011

- 1st Play Title:** _____
- a. Category (Check One): Drama ____ Comedy ____ Musical ____ Youth ____ Adult ____
- b. Running time: _____
- c. Please provide a two sentence synopsis. _____
- _____
- d. Has this play been produced before? _____
- e. If yes, was it under any equity contract in the past years? _____

- 2nd Play Title** _____
- a. Category (Check One): Drama ____ Comedy ____ Musical ____ Youth ____ Adult ____
- b. Running time: _____
- c. Please provide a two sentence synopsis. _____
- _____
- d. Has this play been produced before? _____
- e. If yes, was it under any equity contract in the past two years? _____

Name: _____

Address: _____

Phone #: _____ Cell #: _____

Email: _____

Please make sure of the following:

1. Script pages are numbered
2. Front cover has Play Title, Playwrights Name, Address, Phone Number, and Email.
3. Character breakdown.
4. If you would like to be notified that your script has been received include a stamped postcard with your address and we will post it.
5. Do not send us an original copy. We will not return scripts so please send copies only.

By signing below, I certify that I give Turtle Shell Productions permission to produce one or both plays listed above in their 8 MINUTE MADNESS PLAY FESTIVAL 2012. I also give Turtle Shell Productions permission to video the performance to be distributed to production and cast under the condition that no party will use said video for the purpose of claiming any copyright ownership. I have read and understand this application, and that the information that I have provided is true to the best of my knowledge.

Signature _____ Date _____

Name (print) _____

Please send to the, Turtle Shell Productions, 300 W. 43rd St., Suite # 403 New York, NY 10036.
ATTENTION: 8-MINUTE MADNESS FESTIVAL