



# The CHAMELEON THEATRE CIRCLE

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## ENTRY FORM

# 24th Annual New Play Contest

### Contact Information

Submission # \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ E-mail \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

### Script Information

Category:  10-Minute     One-Act     Full Length     Musical     Theatre-for-Youth

Script Title: \_\_\_\_\_

Cast List:

_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral
_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral

Plot Synopsis:

\_\_\_\_\_

\_\_\_\_\_

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**Please Note:** • A *separate* Entry Form must be sent for each play when submitting multiple plays.  
 • For submission instructions, please see [www.chameleontheatre.org/](http://www.chameleontheatre.org/)

### Agreement

By signing below, you understand and agree to the rules of the contest as posted at [www.chameleontheatre.org](http://www.chameleontheatre.org) and that this script has not been previously produced and is a new work.

Signature \_\_\_\_\_

Date \_\_\_\_\_