

Playwright Entry Form
(2010 MoACT Theatre On The Fly)

Name: _____ Address: _____

Phone: _____

Email: _____

Title of script (up to 3 pieces allowed per playwright): (1) _____

(2) _____

(3) _____

Official Waiver:

I, the undersigned, attest that the script(s) I have entered into the festival are my own work and have *not* been performed anywhere prior to the festival date of August 28, 2010. I also attest that I am a resident of the state of Missouri. I understand that there is no monetary award or reciprocation of any kind other than the opportunity of seeing this work performed. If my script/scripts, is/are chosen by MoACT, I hereby grant MoACT permission to perform them, in a staged reader's theatre format before an audience, for one performance on August 28, 2010 and expect no royalty or payment of any sort in return.

(Your Signature and date of signing)