

# Estrogenius Festival Festival 2010 Sola Voce Coversheet

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**Name:**

**Email Address:**

**Address:**

**Telephone Number:**

**City, State, Zip, Country:**

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**SUBMISSION TITLE:**

**Estimated Running Time:**

**The following is included:** DVD  VHS  Graphic for the show

**Blurb for your show:**

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**Please complete the following:**

*(These questions are for informational purposes only and will NOT affect the review of your submission. Plays selection will be based solely on artistic merit.)*

- How did you hear about EstroGenius?
- What made you want to submit?
- Have you submitted to EstroGenius previously? Yes  No
- Has the work you're submitted been produced previously? Yes  No   
If yes, when & where?
- Have other works been produced? Published? Yes  No   
If so, please list a few of your best & brightest experiences.
- Do you live in the NYC area? How large is your mailing list?
- If you don't live in the NYC area, how do you plan to market your show? Do you have local connections to cultivate to bring in audiences?

*Thank you for your time & interest in EstroGenius 2010!*

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