

Estrogenius Festival Festival 2010 Short Play Coversheet

Submission No.

Please fill out ALL information below:

SUBMISSION TITLE:

Number of Characters: Men _____ Women _____

Number of Pages: _____ Approximate Running Time: _____ min.

1 – 3 Sentence Description of the Play:

Please select one style: Drama Comedy Dramey

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.

Name:

Email Address:

Address:

Telephone Number:

City, State, Zip, Country:

Thank you for your time & interest in Estrogenius 2010!