**INTERNATIONAL DUBLIN GAY THEATRE FESTIVAL**

**SUBMISSION FORM**

*Note: Deadline for Submissions is in December for the following year’s Festival. Check* [*www.gaytheatre.ie*](http://www.gaytheatre.ie/) *for more details.*

Name of Play:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Company:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Contact Name and Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landline Telephone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name/Contact of Producer/Agent if different from above\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Number in Cast (Male/Female):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number & Title of essential Crew (if any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the play been performed in Ireland/Europe before?: **Yes / No**

Do you have the licence to perform this production? **Yes / No**

Duration of performance :\_\_\_\_\_\_\_minutes (Max. 75 minutes no interval)

Do you have Poster Artwork and Flyers available? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any special requirements in order to stage this production in Dublin and if so

please indicate what these might be? (e.g. Size of stage; capacity of venue; etc.)\_\_\_\_\_\_\_\_

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Do you have a preference to perform in Week 1 or Week 2 of the Festival: **1 / 2**

Please confirm you have read the attached ‘Criteria For Participation’ Document. **Yes / No**

Do you accept that by making this submission you are guaranteeing that if selected, you will bring the production to Dublin under the terms set out in the ‘Criteria For Participation’ Document? **Yes / No**

***Please send this completed form together with a signed copy of the attached Criteria For Participation Document, a copy of the script plus any relevant additional material (reviews, CV’s, flyers, etc.) to:***

**e-mail copies of completed forms to** info@gaytheatre.ie

**Brian Merriman, Artistic Director, 179 South Circular Road, Dublin 8, Ireland**