

# ESTAFest/Original Works PRODUCTION and TECHNICAL REGISTRATION

*This form must be completed and returned to the ESTAFestival Chairperson prior to April 7, 2012.  
State level membership is required to participate in ESTAFest/Original Works Festival.*

<b>Festival Entry</b>	<b>Festival Dates</b>	<b>Submitted by:</b> _____ <b>Individual Name</b> _____
<input type="checkbox"/> <b>ESTA Entry</b>  <input type="checkbox"/> <b>OW Entry</b>	<b>04/19-22/2012</b>	<b>Submitted by:</b> _____ <b>Theatre Name</b> _____
		<b>Submission Date:</b> _____ <b>MM/DD/YEAR</b> _____

## THEATRE INFORMATION

Theatre Name \_\_\_\_\_

Contact Person \_\_\_\_\_ Position \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephones: **(O)** \_\_\_\_\_ **(C)** \_\_\_\_\_ **(H)** \_\_\_\_\_

**(F)** \_\_\_\_\_ E-Mail Address \_\_\_\_\_

## PRODUCTION INFORMATION

Production Name: \_\_\_\_\_

Author/Composer Name(s): \_\_\_\_\_

Estimated Set-Up Time: \_\_\_\_\_ Estimated Run Time: \_\_\_\_\_ Estimated Strike Time: \_\_\_\_\_

## ENTRY / PRODUCTION REPRESENTATIVE

Entry/Production Representative Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephones: **(O)** \_\_\_\_\_ **(C)** \_\_\_\_\_ **(H)** \_\_\_\_\_

**(F)** \_\_\_\_\_ E-Mail Address \_\_\_\_\_

## TECHNICAL REPRESENTATIVE

Technical Representative Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephones: **(O)** \_\_\_\_\_ **(C)** \_\_\_\_\_ **(H)** \_\_\_\_\_

**(F)** \_\_\_\_\_ E-Mail Address \_\_\_\_\_

# ESTAFest/Original Works TECHNICAL INFORMATION

## Technical Requirements – Please attach Lighting Plot and Set Design if available.

**Lighting Needs** – Please detail any specials you intend to use including instrument type, preferred hang location, approximate focus location, and whether you will be providing it (them) or if you would like festival host to. Please note any equipment you plan to bring under “Special Equipment” on the reverse side.

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Followspots : **The Theatre has one followspot. Operator  Not Needed  We will provide  Please provide**

**Sound Need** – Please detail any equipment that you will need such as reel-to-reel tape deck(s), cassette deck(s), CD player(s), offstage microphone(s), etc. Please note any equipment you plan to bring under “Special Equipment” on the reverse side.

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**Set Specifications** – Please detail any soft goods including trim and opening. Please attach a floor plan and sectional view of your set if available. In addition, please let us know the approximate space you will need for set storage as the theatre has no wing or backstage space. This will aid in determination of additional storage requirements at the theatre.

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**Fly Space Requirements** – Please detail the number of fly lines that you want. Include your preferred location, their intended use, and the approximate load weight. **NO FLY SPACE AVAILABLE AT THEATRE**

**Special Equipment/Needs** – Please detail any special effects equipment you may be bringing (especially those involving smoke, fog, or combustible material.) **Any equipment not approved by the Festival Technical Director, prior to your arrival, may be prohibited from use in the theatre. SPECIAL APPROVAL MAY BE REQUIRED FOR ONSTAGE SMOKING.**

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**Other Special Considerations** – Please note if your production uses firearms or other weapons (real or simulated) or uses any type of open flame (including matches, candles, etc.)

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## Personnel Requirements

*Please mark your personnel requirements on the grid below. Note that due to contractual agreements in some theatres, certain positions may have to be staffed by house personnel.*

<b>Light Board Operator</b>	Not Needed	We will provide	Please provide for us
<b>Sound Board Operator</b>	Not Needed	We will provide	Please provide for us