College of the Canyons

New Works Festival

Submission Form for Play, Scene or Monologue

Please submit four copies of each script, and fill out one form per script submission.

NAME:	
TITLE OF PLAY / MONOLOGUE:	
I have read and signed the attached waiver. Signature:	
CONTACT INFORMATION	
Address:Number/Street	Apt./Unit:
City/Zip	
Telephone Number: () E-mail Address:	
How did you first hear about the New Works Festival? (Please check one) Newspaper – Which one? Flyer / Poster / Banner Postcard Instructor Schedule of classes Friend/relative/acquaintance Attended NWF event in the past New Works Festival Webpage Other:	For TLC use only: Script I.D. Number (for anonymous identification) Date Received Total Pages