

2019-2020 FLORIDA STATE THESPIAN FESTIVAL MAINSTAGE APPLICATION

Troupe Director _____ District _____ Troupe _____

Mainstage Director (if different from Troupe Director**) _____

School _____

Address _____ City _____ ZIP _____

School Phone/ext. () _____ Home Phone () _____

REQUIRED E-MAIL FOR ALL CORRESPONDENCE _____

EMERGENCY CELL PHONE () _____ (MUST have with you the night of the performance)

ATTENTION: Having read the criteria for selecting Mainstage productions at the Florida State Thespian Festival and the Mainstage Guidelines posted online, the following is submitted for your consideration as a possible Mainstage production:

Title of Play _____

Author _____ Publisher _____

Which of the following venues would be able to accommodate your play?

_____ Morsani Hall _____ Ferguson Hall _____ Tampa Theatre _____ TECO Black Box Theatre

List ALL dates of production _____

(you must offer a minimum of **two performances (not on the same day)** and one of them must be on either a Friday or a Saturday)

Curtain time _____ TOTAL Running time of play _____ (Not to exceed 2.5 hours, including intermission)

Location (performance site) _____

FULL Address _____ City _____

I, as Troupe Director, have read the criteria for selecting Mainstage productions and the Mainstage application form and confirm that the **Director of our mainstage has been employed by our school for at least the last two years and has attended at least two State Thespian Festivals with a troupe as a registered attendee of the festival. **I understand a troupe must participate in a District festival in the same school year to be eligible to selected as a Mainstage.** I understand that this form must be received no later than **September 13th, 2019**, and that late applications will not be accepted. **Our production date falls between September 26th and November 24th, 2018.** No production will be screened outside of this screening window. If we are found out of compliance of mainstage requirements, I understand that our request for screening may be denied. Our performance will include the same script, cast, costumes, and set as would appear at the Festival, unless otherwise requested by the State Director, or modifications need to be made to fit the venue assigned. I understand that, should our production be selected, we will be held to time restrictions in loading in and out of venues, and may be requested to modify elements of our production to fit the requirements of the venues and of the Florida State Thespian Festival. Enclosed is our check made payable to Florida State Thespians. If our production is a play cutting or one-act from a full-length play, also enclosed is written permission from the play publisher to present this condensed version. **The application fee is non-refundable.** If we are screened, we will be informed whether or not we are under consideration within 2 weeks of being screened. **I understand if selected, my State registration must be received on time, complete with payment or our selected Mainstage may be canceled at the discretion of the State director.** I understand that my judges critiques will not be sent to me until after the mainstage screening committee has met the first week of December. I have read and agree to the latest Mainstage Guidelines available on the web at www.floridathespians.com.

COPY THIS FORM FOR YOUR RECORDS

Mail this form and the \$500 fee made payable to FLORIDA STATE THESPIANS. All fees and applications are due by September 13th, 2019 to:

Lindsay M Warfield, State Director - Florida State Thespians- 4522 W. Village Dr. #307-Tampa, FL-33624

Troupe Director's Signature

District Chair Signature

Date