**SCOTTISH ASSOCIATION OF YOUNG FARMERS CLUBS**

**WEST REGIONAL DRAMA FESTIVAL 2025**

# **ENTRY FORM**

All aspects of this form should be completed to aid in the printing of the programme.

**………………………….. CLUB** is taking part in the above Festival and gives the following information:

(A) NAME OF PLAY

(B) AUTHOR

(C) CAST IN ORDER OF APPEARANCE: N.B. **Please mark all First Time Performers at Regional Level.**

CHARACTER Name of Member Please Tick if first   
 time performer

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TYPE OF PLAY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(e.g. Scots, English, etc, Tragedy, Drama, Comedy, Farce, Fantasy etc)*

(D) SCENE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(E) PERIOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(F) NAME OF PRODUCER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(G) CLUB STAGE MANAGER (must be a member) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I declare that to the best of my knowledge the foregoing statements are accurate.

Signed Position

A COPY OF THE PLAY ROYALTY LICENSE, SCRIPT AND LIGHTING PLAN MUST BE SUBMITTED ALONG WITH THIS FORM. NO LATE ENTRIES WILL BE ACCEPTED UNDER ANY CIRCUMSTANCES.

**ENTRY DEADLINE: Friday 31st February 2025**