

The Freeport Players' Guild Young Writers Playwriting Competition

Official Entry Form

First name _____ **Last name** _____

(If applicable): School _____ **Grade** _____ **Age** _____

Teacher/Advisor _____

Address _____

Telephone Numbers:

Home _____ **Cell** _____

Father's Name (optional) _____

Mother's Name (optional) _____

Title of Play _____

Length (pages) _____

Brief Synopsis of play _____

Please read and sign the form below certifying your authorship of the play.

I, *(Please print name)* _____ certify that I am the author of the above named play and that this is completely my own work and all copyright laws have been followed. If selected I agree to abide by the official rules stipulated by the Freeport Players' Guild.

_____ *Signature*