

**PROGRAM PROPOSAL FORM**

Primary Contact Name/Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address/City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of play or show \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief description (*include whether this program will require royalties and who owns rights.*)

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Number of Cast \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Circle either Yes or No to each of the following:**

Sound system: Yes / No Special Stage Lighting: Yes / No Projector: Yes / No Spotlight: Yes / No

Does your show involve fire, blades, or dangerous items? Yes / No

Do you have a tech person to run lights/sound? Yes / No

OPAL will promote your event online through email, Facebook, and the OPAL website as well as sending a press release to the Cottage Grove Sentinel, Register-Guard, and Eugene Weekly.

The Opal Center will assist/reimburse with expenses for Theater performances with props and sets.

**Send completed proposals to:** **ocae@opalcentercg.org**