

**Original Works Project**  
*Registration Form*

**-Please print clearly-**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

***(Primary communication for this program will be through email)***

**Please review the program schedule and** list any conflicts you may have. Please note that by registering, you agree to be available for workshops, one-on-one meetings, group feedback sessions, rehearsals, performances and the striking of the set. The program will accommodate some absences, but registrants are expected to commit to the schedule as fully as possible.

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**Please briefly describe your prior writing experience.** Especially include any playwriting experience you may have had. All levels of writing experiences are welcome!

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*I agree to allow San Juan Community Theatre to use my name and any photos taken in connection with this production for publicity purposes for this production and for future promotion of programming and productions for the Theatre.*

Signature \_\_\_\_\_ Date \_\_\_\_\_