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Production Proposal Form

Name: _____ **Phone #:** _____

Address: _____

E-mail: _____

Have you directed for PCT before? No ____ **Yes** ____ **If yes, then what production(s)?**

Please fill out a separate form for each proposal.

Title of Show: _____

Proposed Production Dates:

Directing Experience: *Please list productions you have directed for other theatres and locations.*

Theatre Experience:

Revised October 2016

Production Requirements: *Please fill in the following sections.*

Short Synopsis:

Production Running Time: _____

Cast Size _____ **Males** / _____ **Females** / _____

Chorus Can roles be doubled if necessary? __ **No** ____ **Yes**

Orchestration:

Proposed Production Staff (if available):

Production Manager: _____

Stage Manager: _____

Costumer: _____

Set Designer: _____

Props Manager: _____

Music Director: _____

Rehearsal Accompanist: _____

Orchestra Personnel: _____

References: *(Please provide names and telephone numbers of at least three people we can contact about your theatre/directing experience. Feel free to use PCT Board of Directors as References)*

Proposed Budget: *Please fill in the estimated budget items below.*

<u>Staff</u>		Non-Musical	Musical
Director			
Production Manager			
Choreographer			
Music Director			
Rehearsal Accompanist			
Orchestra			
Costumer			
Other:			
Other:			
<u>Production</u>			
Royalties			
Scripts/Librettos			
Set			
Lights			
Props			
Costumes			
Sound			
Hair/Makeup			
Publicity			
Other:			
Other:			
<u>Income</u>			
Ticket sales			
Other:			
Other:			