COMMUNITY PLAYERS OF HOBBS

Show Proposal

Season: _____

Director: _____ **Have you ever directed a production at the Playhouse? Y/N**

Phone #:_____ **Email:** _____

(Production team must initial to indicate they accepted the position)

Assistant Director:_____ **Phone #:**_____ **A.D. Initials:**_____

Music Director:_____ **Phone #:**_____ **M.D. Initials:**_____

Stage Manager:_____ **Phone #:**_____ **S.M. Initials:**_____

Props Master:_____ **Phone #:**_____ **P.M. Initials:**_____

Choreographer:_____ **Phone #:**_____ **Coero Initials:**_____

Hair/Makeup:_____ **Phone #:**_____ **H&M Initials:**_____

Name of Play: _____

Author: _____

Publisher: _____

Royalty: $_____ Number of Performances_____ **total $**_____

Scripts: $_____ Number of Scripts Needed _____ **total $**_____

Which production slot would you prefer? ____1st, ____2nd, ____3rd, ____4th, ____5th, ____6th
Place a *1* by your first choice and *2* by your second choice. The *exact dates* will be determined by the BOD.

Type of Play (check one): ____ Full-Length ____ One-Act

Audience: (check those that apply): ____ All Audiences ____ Adult
____ Adult Themes ____ Strong Language

Genre (check all that apply): ____ Comedy ____ Farce ____ Musical
____ Drama ____ Melodrama ____ Suspense
____ Dramedy (drama with comic undertones)
____ Children's Theater (with adult actors for children's audience)
____ Children's Show (with child actors for a children's audience)
____ Other _____ (Describe)

Appx. Running time: _____

Cast (how many men, women, and children): ____ Men _____Ages
____ Women _____Ages
____ Boys (18 & under)
____ Girls (18 & under)

Set (describe the setting needs):

Approx. Set Budget $_____

Costumes (describe the costuming needs):

Approx. Costume Budget $_____

Approx. TOTAL Budget $_____

Seating Chart Preference: Please indicate which seating chart you would like for your show.
****Once ticket sales have begun we cannot change the seating chart.****

_____ **Standard** *(L-C-R NO floor seats)*
_____ **Full** *(LL-L-C-R-RR NO floor seats)*
_____ **Full Extra** *(LL-L-C-R-RR WITH floor seats)*
_____ **Custom** *(please include proposed seating chart, must be approved by the board if chosen)*

By signing below, I acknowledge that I have read the directors guidelines and if my show is chosen, I agree to abide by them and to hold my cast and crew responsible for their portions of the guidelines as well.

X_____

BRIEF SHOW INFORMATION

YOU MUST SUBMIT THE PUBLISHED SCRIPT WITH YOUR PROPOSAL.

Synopsis:
(helps AAB in decisions for the season)

Explain why you think the Community Players of Hobbs should produce this play:
(helps AAB in decisions for the season)

Any additional information you would like to include about your proposed production:
(helps AAB in decisions for the season)