

**Actors Community Theater of Seymour**  
**Director's Proposal**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Submission Date \_\_\_\_\_ Name of Play \_\_\_\_\_

Genre(s) \_\_\_\_\_ Author(s) \_\_\_\_\_

Publisher \_\_\_\_\_

Brief Synopsis \_\_\_\_\_

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Cast Required \_\_\_\_\_

Proposed Budget \_\_\_\_\_

Scenic Needs \_\_\_\_\_

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Costume Needs \_\_\_\_\_

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Musical Requirements \_\_\_\_\_

Desired Show Dates \_\_\_\_\_

Why do you want to direct this show? \_\_\_\_\_

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