



PERFORMANCE DETAILS FORM

SCHOOL _____

We must have two contacts from each school. Phone numbers may be the school number or your cell phone.

PRIMARY CONTACT PERSON _____

PHONE _____ EMAIL _____

SECONDARY CONTACT PERSON _____

PHONE _____ EMAIL _____

SHOW _____

LYRICIST of SHOW _____

COMPOSER OF SHOW _____

LICENSING HOUSE _____

PERFORMANCE DATES AND TIMES

DATE _____ TIME _____ DATE _____ TIME _____

DATE _____ TIME _____ DATE _____ TIME _____

DATE _____ TIME _____ DATE _____ TIME _____

ADDRESS OF PERFORMANCES

Street _____ City _____ Zip _____

PARKING INFORMATION _____

ENTRANCE TO THEATRE _____

LOCATION OF BOX OFFICE _____

IS THE SHOW DOUBLE CAST? YES NO

If YES, please indicate which performance you want reviewed. All reviewers must evaluate the same cast: If NO, the reviewers may come on different nights.

FOR EACH POSITION, PLEASE PROVIDE THE NAME OF THE PERSON AND THEIR AFFILIATION.

NAME(S) of DIRECTOR _____

FACULTY STUDENT GUEST ARTIST

NAMES(S) of CHOREOGRAPHER _____

FACULTY STUDENT GUEST ARTIST

NAME(S) of MUSICAL DIRECTOR _____

FACULTY STUDENT GUEST ARTIST

ORCHESTRA

OF STUDENTS FROM YOUR SCHOOL _____

OF FACULTY/PROFESSIONALS/ OTHER _____

WE DO NOT USE AN ORCHESTRA; WE USE PRE-RECORDED MUSIC YES NO

COSTUMES

% SHOPPED/BUILT _____ % RENTED _____

WHO DESIGNS THE COSTUMES? FACULTY STUDENT GUEST ARTIST

IF COSTUMES ARE BUILT, DO STUDENTS CONTRIBUTE AT LEAST 50% TO THE IMPLEMENTATION OF THE DESIGN? YES NO

SCENERY/PROPS

% SHOPPED/BUILT _____ % RENTED _____

WHO DESIGNS THE SET? FACULTY STUDENT GUEST ARTIST

IF THE SET IS BUILT, DO STUDENTS CONTRIBUTE AT LEAST 50% TO THE IMPLEMENTATION OF THE DESIGN? YES
NO

OTHER THAN AS PERFORMERS, HOW ARE STUDENTS IN YOUR SCHOOL INVOLVED IN THIS PRODUCTION?

USHERS/HOUSE STAFF

CREW

STAGE MANAGEMENT

MARKETING

OTHER (PLEASE SPECIFY)

APPROXIMATE NUMBER OF STUDENTS INVOLVED IN THE MUSICAL IN ANY CAPACITY (if relevant, please include students from other schools cast in your show and younger students in your cast)

WHY DID YOU SELECT THIS SHOW?

ARE THERE ANY CIRCUMSTANCES ASSOCIATED WITH YOUR PRODUCTION THAT WE SHOULD KNOW (venue limitations, etc.)?

IS THERE ANY CROSS-CURRICULAR INTEGRATION (history/lit classes) ASSOCIATED WITH YOUR PRODUCTION?

OTHER THAN AS AUDIENCE MEMBERS, IS THE COMMUNITY INVOLVED IN ANY WAY IN YOUR PRODUCTION? (For instance: the parents help build the set or supply meals during tech; local businesses donate something; local Scouts are used as ushers or are in the production)

TENTATIVE SLHSMTA CALENDAR (SUBJECT TO CHANGE)

Intent to Participate	registration opens July 1, 2019
Teacher Orientation	early September
Reviewing of productions	September 30, 2019-April 25, 2020
Nominee Announcement	early May
Medallion Ceremony	early May
Rehearsals at The Muny	June 1st – June 11 th (evenings)
Rehearsals at the Fox	June 12 th – June 14 th
SLHSMT Awards Ceremony at The Fabulous Fox	June 14 th at 4:00 PM

We will be developing a rehearsal schedule for the opening number, the leading actors and actresses, the supporting actors and actresses, and the production numbers for the nominated productions. To help us craft that schedule to accommodate as many students as possible, please provide the following information:

DATE OF GRADUATION _____ TIME OF GRADUATION _____
 DATE OF BACCALAUREATE _____ TIME OF BACCALAUREATE _____

OTHER EVENTS (Finals, honors convocation, spring concerts, etc. **between June 1-June 14**) Please be as specific as possible.

EVENT	DATE	TIME
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

