

DRAMA PRESENTATION FORM

Please Check One

- Monologue Spoken Word Solo Mime Solo Human Video
 Solo Pantomime Solo Expressive/Interpretive Movement

NAME OF INDIVIDUAL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

LOCAL CHURCH _____

TITLE OF PERFORMANCE _____

APPROXIMATE TIME _____

EXPLAIN THEME OF PRESENTATION _____

Please Check One

- Group Skit Group Mime Group Human Video
 Group Pantomime Group Synchronized Movement
 Expressive/Interpretive Movement, Group

*NAME OF GROUP _____

LOCAL CHURCH _____

ADDRESS _____

TITLE OF PERFORMANCE _____

APPROXIMATE TIME _____

EXPLAIN THEME OR PURPOSE OF PRESENTATION _____

****This form must be completed and sent in with the Registration Form.****

GROUPS MUST COMPLETE THE DRAMA GROUP MEMBERS LIST, LISTING THE NAME, AGE, AND BIRTH DATE OF EACH PARTICIPANT.