

moosa arts theatre

2025 PRODUCTION PROPOSAL

Name: _____

Address: _____

Phone: _____ Email: _____

Name of Production: _____

Author/s: _____

Genre (drama, comedy, musical etc): _____

How much are the royalties per night? _____ Are Performing Rights available? _____

Cast (& ages): -

M: _____

F: _____

Motivation for this production: _____

When would you like to do this production? _____

Set Requirements: _____

Tech Requirements: _____

Synopsis of script: *(please also attach a copy of the script)* _____

Your theatrical CV: *(feel free to attach a separate document)* _____

For further information contact **Jane Rivers** by emailing timjanerivers@hotmail.com or phoning on 0429 497 756.

Please return this form, budget details and attachments to:
The Production Committee, PO Box 3, Noosa Heads, Qld. 4567
OR email to boxoffice@noosaartstheatre.org.au

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EMAIL: info@noosaartstheatre.org.au WEBSITE: www.noosaartstheatre.org.au