

## **ESTA Festival** Registration and Fee Form

Complete form and make all CHECKS payable to ESTA and send checks to:

**VP Of Festivals PO Box 4378** 

Wilmington, De 19807-0378

To pay online: (complete form and email to vpfestivals@estafestival.org) and pay online at www.estafestival.org

SECTION 1	PARTICIPANT THEATERS COMPLETE THIS SECTION							
Theater Name			State					
<b>Contact Person</b>								
Production Title 1				<b>Production Title</b>	e 2			
Production Title 3				Production Title	e 4			
Mailing Address								
City		State		Zip Code				
Phone (H)		Phone (C)		·	Phone (O	)		
Email								
	participants & roles Performance Sessio		ss or	# Shows and or People	X	Amount	=	Total \$
Production Entry I	-ee				Х	75	=	
Participant SuperPass for Cast/Staff& Board Members (includes all events)				Х	75	=		
Performance Sess crew or individual not performance session (This will allow you int	purchasing a SuperPa price applies.)				х	30	=	
Non Participant Su	uperPass (includes a	all events)			Х	80	=	
Showcase Entry T	icket				Х	50	=	
Awards Banquet -	(for those not purch	nasing a Sup	er Pass)		Х	45	=	
						Total	=	
Note: You may list up to four (4) productions on one form. To enter more than four please complete additional form.								

## **SECTION 2 PRODUCTION PARTICPANTS:**

Please list all participants associated with your production and the type of fee paid. Participant Passes are for those participating in your production. All others must purchase a Non Participant SuperPass or Session Ticket. If you need more space please use back of this form.

Cast/Crew Member Name	Role (i.e. Actor, Director, Playwright, etc.,)	SuperPass	Session Only