

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						St	ate		
Contact Person									
Production Title 1				Production Title	⊋ 2				
Production Title 3				Production Title	e 4				
Mailing Address									
City		State		Zip Code					
Phone (H)		Phone (C)			Phone	(0)			
Email					•				
	participants & roles Performance Sessio		ss or	# Shows and or People		Х	Amount	=	Total \$
Production Entry F				от гоорго		X	100	=	
Discount Participa Members	int SuperPass for (Cast or Staff	ı			X	75	=	
Performance Session ONLY fee (for any member of a cast or crew not purchasing a SuperPass, the \$30 individual performance session price applies.) This will allow you into your session only						х	30	=	
	kshop Pass (only if there is a scheduled one for the val) (Included in Superpass or Pay at door at time of Festival)								
Individual AfterGlow Ticket – (only if there is a scheduled one for the festival, & is included in Superpass ticket)						X	25	=	
Awards Banquet – (not included in the super pass)					X	60	=		
				•	<u> </u>		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