

DECLARATION

We enclose:-

- 1. Full payment of £15 - non-BDTG members.] Please delete
- 2. Payment of £8 for BDTG members.] as appropriate.

(By becoming a member of the Guild, each peripatetic entry costs £8 and you also receive the quarterly in-house newsletter. Group Membership only costs £18 a year)

Cheques made payable to BDTG

We agree to abide by the statements listed on page 2 of this entry form.

NAME (block letters).....

SOCIETY (block letters).....

.....

DATE.....SIGNATURE.....

POSITION IN SOCIETY.....

ADDRESS (block letters)

.....

.....

TEL:

EMAIL:

Please indicate the date which you would prefer for your review

.....

**BIRMINGHAM'S PERIPATETIC
FULL LENGTH FESTIVAL**

OF

ACTING AND MUSICAL ENTERTAINMENT

Presented by

THE BIRMINGHAM AND DISTRICT THEATRE GUILD

1st March 2018

to

31st January 2019

B.D.T.G.
11 Howard Road
Yardley
Birmingham
B25 8AL

Email: bdtg@btinternet.com
website: www.bdtg.org.uk

Guild Secretary: Mrs Jean Cunnington 012 1707 6684

Trophies are available, and will be presented on the Awards evening of Festival Weekend 2019

All Entrants must:-

- ◆ Ensure that adequate time is given (ideally at least 4 weeks) for the reviewers to diary the performance date.
- ◆ Entry must be a minimum of 90 minutes long excluding intervals.
- ◆ Make available two seats for the reviewers and two programmes.
- ◆ Abide by the Festival Rules, copies of which can be obtained from the BDTG.
- ◆ Abide by the reviewers' decision which is final.

N.B.

- * The Committee reserves the right to refuse any entry into the Festival.
- * Every attempt will be made for the review to be on your chosen night.

Your society should be represented at the Awards Evening of BFAME at Highbury Theatre Centre on 3rd March 2019

Please retain this section for reference

Please return pages 3 & 4 to the BDTG as soon as possible so that we can confirm the reviewers' availability.

11 Howard Road, Yardley, Birmingham B25 8AL

Society: _____

Title of Entry: _____

Author/Composer _____

Venue Name & Address; _____

Performance Dates: _____

Start Time: _____

Please indicate with an x the category in which you wish to compete.

| | | | |
|----------------|--|--------------|--|
| Musical | | Drama | |
|----------------|--|--------------|--|

Are all of your actors aged 18 years or under Yes No