

Submission Form 2015

submissions@muddymary.ca www.muddymary.ca

I am applying as: an individual a collective	
Collective Name (if applicable):	Primary Contact Name:
Primary Contact Address:	
City:	Postal Code:
Phone Number:	Email Address:
Working Title of Submission:	I require actors for my submission: Yes No
I require a stage manager for my submission:	I require a director for my submission:
Yes	Yes
No	No
Why do you think your submission is right for The Muddy Mary Project?	