

□

Contestant number

(Do not write here)



# NATIONAL SOCIETY OF ARTS AND LETTERS

2019 Annual Awards Competition May 30-June 2, 2019

Washington, D.C.

[www.arts-nsal.org](http://www.arts-nsal.org)

## DRAMA

### CONTESTANT APPLICATION FORM

Please print in black ink or type — complete all four forms.

Name: \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_  
                    First                    Middle                    Last

Current Address: Street [Apt. No.] \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ U.S. Citizen [ ] Yes

Other form of legal residence \_\_\_\_\_

**Enclose a photocopy of passport, birth certificate or other document verifying date of birth and citizenship or legal residence.**

Address where you can always be reached:

c/o \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Note: Contestant must enclose two recent black and white headshots with name, address, and chapter clearly indicated on back.**

Name \_\_\_\_\_

### Formal Education and Training

[Add an extra sheet if necessary]

Institution	Location	Dates Attended	Degree

### Performance Experience

[Add an extra sheet if necessary]

Performance	Theatre	Location	Date

Outstanding teachers and institutions where you studied and/or directors with whom you have worked and location(s): \_\_\_\_\_

\_\_\_\_\_

Honors, Awards [as related to theatre]

\_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

**Newspapers or other media where publicity about you should be sent:**

Name: \_\_\_\_\_

Address or email: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Address or email: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Address or email: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Address or email: \_\_\_\_\_  
\_\_\_\_\_

**Send completed application to the following:** (Contestants do not write in this box.)

**(TO BE COMPLETED BY CHAPTER)**

To: Name of Chapter \_\_\_\_\_

Drama Chair Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address: \_\_\_\_\_

**DEADLINE FOR CHAPTER APPLICATION** \_\_\_\_\_

Note: Contestant must enclose two recent black and white headshots (name, address, & chapter on back) and a photocopy of the document verifying birthdate, permanent address, and citizenship or legal residence.

NATIONAL SOCIETY OF ARTS AND LETTERS  
2019 National Annual Awards Competition

**CONTESTANT CERTIFICATION FORM**

Please type or print in black ink

**Contestant Name:** \_\_\_\_\_

**Chapter to which application is submitted:** \_\_\_\_\_

**Competition Information:**

1. Category (indicate comedic or serious): \_\_\_\_\_

Title of Classical Play: \_\_\_\_\_

Playwright: \_\_\_\_\_

Name of Character: \_\_\_\_\_

Scene & Act: \_\_\_\_\_

2. Category (indicate comedic or serious): \_\_\_\_\_

Title of Modern Play: \_\_\_\_\_

Playwright: \_\_\_\_\_

Name of Character: \_\_\_\_\_

Scene & Act: \_\_\_\_\_

**Certification:**

I certify that all of the information on this form and application is true and complete. I agree to conform to the rules and regulations of this competition and to be available from May 31 - June 2, 2019 at the national conference should I be the Chapter first place winner. My name and photo may be used in NSAL publications and for publicity purposes on our website, social media and You Tube.

**Contestant Signature (Required):** \_\_\_\_\_

(If application is submitted by email, please type in full legal name. A hard copy signature will be required if the contestant is the Chapter first place winner.)

\*\*\*\*\*

**TO BE COMPLETED BY CHAPTER**

Printed Name and Signature \_\_\_\_\_  
(NSAL Chapter Drama Chair)

Printed Name and Signature \_\_\_\_\_  
(NSAL Chapter Sponsor who will attend competition)