

PROGRAMME QUESTIONNAIRE



Name of Group: _____

Title of Play: _____

Author: _____

Director: _____

JUNIOR / SENIOR Entry (*Delete as applicable*)

Members of the cast (*Name / Character*)

Brief description of where the play takes place and when

Back-stage Team

Please give a few brief notes about your team for the Festivals own background information e.g. where you meet, how often, when the group was first formed, if you take part in other Festivals etc.