

Lakeland Players
Director Submission Form

Name: _____

Phone: _____

Email: _____

Address: _____

YOUR Availability:

Fall _____

Holiday _____

Winter _____

Spring _____

Summer _____

Play/Musical Title: _____

Playwright: _____

Genre: _____

Cast Size: _____

Synopsis: _____

Do you have a production team, or do you need help finding one?

Producer: _____

Music Director: _____

Choreographer: _____

Assistant Director: _____

Stage Manager: _____

Costume Designer: _____

Props: _____

Light Design: _____

Sound Design: _____

Why would this show be a good fit for Lakeland Players?

Please tell us about your theatre background and experience:

Do you have a unique vision in mind, pertaining to costumes, technical needs, set, etc?

Please provide a budget estimate for show-related expenses:

Is there anything else you would like us to consider when making our decision?

*Please Email back to Barbra Bloom : bbloom731@gmail.com by January 1st, 2026