



PSF Shakespeare Competition Entry Form
Please fill out completely. Each student may enroll in one event.
REGISTRATION DEADLINE: FEBRUARY 9, 2018

Team Info

School Name:	School Address:
_____	_____
City/State/Zip:	Coach's Name:
_____	_____
E-Mail Address:	Telephone Number:
_____	_____

Monologues

Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____
Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____
Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____

Duo/Trio Scenes

Scene 1

Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____
Student's Name	Grade		Character
_____	_____		_____
Student's Name	Grade		Character
_____	_____		_____

Scene 2

Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____
Student's Name	Grade		Character
_____	_____		_____
Student's Name	Grade		Character
_____	_____		_____

Scene 3

Student's Name	Grade	Title of Play	Character
_____	_____	_____	_____
Student's Name	Grade		Character
_____	_____		_____
Student's Name	Grade		Character
_____	_____		_____



PSF Shakespeare Competition Payment Form

If you need an invoice to make a payment, or for any questions, please contact
610-282-9455 ext. 9 or education@pashakespeare.org.

Worksheet:

Number of students	x	Entry fee	
_____		\$ 25.00	= \$ _____
Number of tickets to DeSales University's Act 1 production of <i>The Devil's Disciple</i>	x	Discounted ticket fee	
_____		\$ 15.00	_____
		TOTAL AMOUNT DUE	\$ _____

Payment:

Check made payable to PSF
 Credit Card

VISA MASTERCARD DISCOVER AMEX

Card Number: _____ - _____ - _____ - _____

Exp. Date: _____ / _____

Signature: _____

Please return completed forms with payment to:

PSF SHAKESPEARE COMPETITION
2755 Station Ave.
Center Valley, PA, 18034