

2025 FLORIDA FESTIVAL OF NEW MUSICALS APPLICATION

*There is no fee to apply or to participate in the Festival. Please refer to the application guidelines for information on submission requirements.

DATE: _____

APPLICANT INFORMATION		
Name of Applicant:		
Street Address:		
City/State:	Country:	Zip Code:
Applicant Phone:	Applicant Email:	
Other Writers' Emails:		
SHOW INFORMATION		
Title of Musical:	_	
Book by:	City/State/C	ountry:
Lyrics by:	City/State/Co	ountry:
Music by:	City/State/Country:	
# of Roles:Readings must be a read multiple parts? YESNO	-	tists or less. Can this be done if artists
Synopsis: Please attach a brief descri	iption of the show, no longer th	nan a half page (<u>see example</u>).
Is the musical completely original? YE (If YES, please submit a signed letter for		cal is original.)
Does the musical contain any copyrig (If YES, please submit a signed letter frights have been secured.)	 _	
Does the musical contain material that (If YES, please submit a letter stating v		

The Winter Park Playhouse is a professional musical theatre, a registered 501(c) (3) non-profit charitable organization and is proudly affiliated with Actors' Equity Association and the National Alliance for Musical Theatre.