

Submission number: \_\_\_\_\_

**Connecticut Heritage Productions “Stories on Stage”  
Official Entry Form**

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Return script? Yes No

(Please include self-addressed stamped envelope with sufficient postage!)

Play title: \_\_\_\_\_

Submission Category (Check one):

\_\_\_ Ten-Minute Play      \_\_\_ One-Act      \_\_\_ Full-Length

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FOR CHP STAFF USE ONLY:

Submission number: \_\_\_\_\_

Date Received: \_\_\_\_\_

Return Script to Author?      Yes      No

Date Returned: \_\_\_\_\_