



FORM FOR CONSIDERATION for onsite PARTICIPATION in Prague

NAME: _____

SCHOOL: _____

YEAR IN SCHOOL: _____ UNDERGRADUATE _____ GRADUATE _____ OTHER

E-MAIL: _____

PHONE: _____

AREA(S) OF DESIGN: (list your areas numerically)

_____ SCENIC _____ LIGHTING _____ COSTUME

_____ OTHER: _____

_____ SOUND _____ PROJECTION _____ PUPPETRY/MASKS

ARE YOU TRAVELLING TO PRAGUE AS PART OF A SCHOOL GROUP OR STUDY TOUR? _____ IF
SO, WHO'S THE FACULTY MEMBER LEADING THE GROUP?

IF YOU KNOW YOUR TRAVEL PLANS/SCHEDULE IN PRAGUE, PLEASE SUPPLY THAT INFORMATION BELOW.

PLEASE attach up to 3 images of your design work to the e-mail with this form. They can be whatever you wish to share that shows your work best... of particular interest to us is any process work or "roughs" that you're willing to share.

If you have any questions, please contact Tom Burch at tomburch@uchicago.edu