

CRITERIA FOR “WITH ONE VOICE: *Letters from the Opioid Crisis Zone*”

1. Submission Deadline: Postmark or Email or Hand Deliver no later than December 8, 2017.

MAIL to: “BDACT – With One Voice”/ P. O. Box 216/ Beaver Dam WI

Or EMAIL to: annette71363@gmail.com or tnienow@pavedc.org or brenda.carefordodgecounty@gmail.com

Or HAND DELIVER to: Annette Kamps (BDACT), 920-887-2093/ Brenda Tratar (C.A.R.E.) or Teresa Nienow (PAVE)

2. Share your personal experience or observation that can specifically enlighten others about the critical opioid circumstance in our communities. It may begin with this suggested introduction:

***“Dear Fellow Citizens of Dodge County,
Opioid addiction is an extremely critical problem in our county. I know because....”***

(Continue by sharing your personal experience or observation in any form -- letter, essay, poetry, testimonial, story, lyric, etc.)

3. Content must be original. Supportive authentic facts from other resources may be included as needed.
4. Computer generated or handwritten.
5. Although the writings may be of any length, an approximate 3-page limit is suggested. *(Pieces may possibly be shortened to accommodate the format of the full program.)*
6. No novels or plays accepted.
7. Selection of writings to be included in the production will be determined by a panel and ultimately by the director, based on their relevance, authenticity, and presentation potential.
8. Each submission will include an agreement, signed by the author, which will give the right to BDACT/PAVE/C.A.R.E to use any part of the author’s submitted work for a public presentation and/or publication.
9. Public acknowledgement of the author is optional, according to author preference.
10. The final selection of writings will be performed by Beaver Dam Area Community Theatre actors and, possibly, some community representatives.

“WITH ONE VOICE: Letters from the Opioid Crisis Zone” SUBMISSION FORM

(Please attach this signed form to your submitted writing)

Date: _____

Author Name: _____ *(This is only for internal use, acknowledgement of author in the program is optional)*

_____ My name may be acknowledged as author.

_____ Please acknowledge author of my writing as “Anonymous.”

Organization: *(if applicable)* _____

Author’s Title or Position *(If applicable)* _____

Phone: _____ **or** _____ **Email:** _____

#####

“WITH ONE VOICE” PRODUCTION AGREEMENT – Please Sign and include with your submission:

I agree to the following terms regarding the staged reading program, “With One Voice,” to be produced by Beaver Dam Area Community Theatre in partnership with P.A.V.E. and C.A.R.E.

I agree that my submitted work for “With One Voice,” may be performed in a staged reading at the Beaver Dam Area Community Theatre or any other venue under the auspices of BDACT, P.A.V.E., or C.A.R.E. with full production rights.

I agree that, if necessary for the program format, BDACT/ P.A.V.E./ C.A.R.E. may cut the length of my work while preserving its message and integrity. However, other than a possible cutting, BDACT/ P.A.V.E./ C.A.R.E. may not change/edit the wording of my remaining writing without my approval.

I understand that my submitted writing may or may not be performed, depending upon selection by a representative panel.

___ My submitted work for “With One Voice,” in full or in part, may be published in book form or any other public format for public distribution.

___ My submitted work may not be published in book form or any other public format other than the staged reading.

Public acknowledgement of my authorship is optional, according to my preference.

I have no fiscal responsibility for this program.

BDACT has no fiscal responsibility to me for my submitted writing.

Author’s Signature: _____

Date: _____