

# Georgia High School Association

**NOTIFICATION OF ENTRY - ONE ACT PLAYS**  
**COMPLETE AND MAIL TO YOUR REGION SECRETARY**  
Region \_\_\_\_\_

Listed below is the information for the One Act Play representing \_\_\_\_\_ High School.

Each pupil listed has been properly certified to the State Office of the Georgia High School Association on Eligibility Reports.

The following play has been approved by the **Principal** of the above listed high school as being in good taste for high school students and acceptable for the morals of their community. Subject matter should not be of lewd or vulgar topic and should be suitable for family viewing.

\_\_\_\_\_  
(Signed – **PRINCIPAL**)

\_\_\_\_\_  
(Date)

DIRECTOR OF PLAY \_\_\_\_\_

Approximate Length of Play (time) \_\_\_\_\_

E-Mail of Director: \_\_\_\_\_

Phone No. Of Director: \_\_\_\_\_

NAME OF PLAY \_\_\_\_\_

Author of Play \_\_\_\_\_ Publisher \_\_\_\_\_ Royalty (if any) \_\_\_\_\_

LIST OF STUDENTS IN PLAY: (Do Not List Crews)  
(List "character" in parenthesis next to cast member's name)

TOTAL: \_\_\_\_\_ Number Female \_\_\_\_\_

Number Male \_\_\_\_\_

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**COMPLETE AND RETURN TO YOUR REGION SECRETARY BY OCTOBER 1**

(Region Secretary must submit the Region Winner school's signed form to GHSA.)