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ENTRY FORM

<u>LITTE PORITI</u>	
NAME OF THE COLLEGE :	
TITLE OF THE PLAY:	
WRITTEN / ADAPTED BY: Ph.No.	
DIRECTED BY: Ph. No.	
NAME OF THE REPRESENTATIVE: Ph.No.	
No. Name of Artists in order of appearance Role in Play	
1	
2	
3	
4	
5	
6	
7	
I certify that the above entries are correct and that all the participants mentioned above are students of my college/ institution.	ona fide
Signature of Director of the Play/Representative Address of the college, Phone No.s, Email:	
For Office use only: Received with Thanks from	a sum
of Rs.1000 /- towards participation fees for LET's ACT English Drama Competition.	