



## Licensing request form: choreography/stage direction

Name of Company, School or Organization:

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Project Director:

name:	phone:	email:
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Person authorized to receive/sign agreement:

name:	phone:	email:
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Piece to be licensed (please check)

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|---|---|
| <input type="checkbox"/> Snow Falls in the Winter | <input type="checkbox"/> Cage Shuffle       |
| <input type="checkbox"/> Short Ride Out           | <input type="checkbox"/> Antigonick         |
| <input type="checkbox"/> The Art of Dancing       | <input type="checkbox"/> The Road Awaits Us |
| <input type="checkbox"/> The Gas Heart            |   |

Performance information:

Number of performances:	Dates:	
Venue Name:	Venue Size:	Ticket Price:

Direction:

<input type="checkbox"/> In-house BDT Regisseur Name:	<input type="checkbox"/> Visiting Regisseur Name:
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Company/Cast info:

Company size:	Number of casts:
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Additional comments/questions:

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For more information please contact [Elizabeth DeMent](#), Director of Creative Workshops and Repertory  
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