

The Harold Green Jewish Theatre in conjunction with Artists in Residence is proud to announce 'Monologue Slam,' the inaugural event of <u>The Barlin Daniels Emerging Artists Initiative</u> which aims to explore and amplify a diverse array of Jewish stories and perspectives, and to present theatre that is thoughtful, inclusive, and reflective of the modern Jewish experience.

'Monologue Slam' will feature the original work of 10 young Canadian artists in response to the question, "What is my Jewish identity?" Submissions are **open to individuals ages 15-30 throughout Canada**. **Applicants must be available on May 12, 2021 for the live broadcast**. Artists of all ethnicities, gender identities, sexual orientations, abilities, and religious affiliations are encouraged to submit.

To apply, please fill out this form in its entirety and submit with a video of yourself performing your monologue. Videos must be between 2-3 minutes. If filming on a phone, please film in landscape.

All submissions should be submitted to monologueslam@hgiewishtheatre.com via WeTransfer. Please name the files FirstName-LastName-MonologueSlam. If you have any questions, email monologueslam@hgjewishtheatre.com. Full Name: ______ Pronouns: _____ Email: ______ Phone: _____ City: _____ Artist Statement – tell us a little bit about yourself and your past work (150 words max). STATEMENT OF ORIGINALITY & AUTHORIZATION _ certify that the submitted monologue is an original piece of work. I have not copied, in whole or part, another source. I further confirm that I am the individual performing the monologue in the video and if selected, agree to perform my original piece at the Monologue slam. Finally, I confirm that on May 21, 2021, I will be between the ages of 15 and 30. By completing this submission I grant permission for HGJTC to exhibit the materials I am submitting now, including the right to use my name, voice and image as they appear therein. I understand that I shall not be entitled to compensation of any kind other than as may be specified herein and that I may not revoke this consent. I have read and understood the forgoing terms above and declare that am at least 18 years of age OR otherwise shall have a parent or guardian sign in the next section to confirm the validity of this consent. Print Full Name: _____ Date: ____ **PARENT/GUARDIAN CONSENT**

I am the parent or legal guardian of the person named above who is under the age of 18. I confirm that the consent and release in the previous section is valid and enforceable and cannot be disavowed.

Print Full Name:	Date:	
		
Email:		