



REGISTRATION FORM

Stage 2 SATURDAYS Programs



Office Use Only	
Date Received:	
Amount:	Cheque#
Name:	
Payment Type:	1 or 2

FIRST NAME	LAST NAME	HOME PHONE NUMBER	E-MAIL ADDRESS (please)
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ADDRESS

TOWN/CITY	POSTAL CODE
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AGE AT START OF SESSION (Circle) 7 8 9 10 11 12 13	DATE OF BIRTH Y M D	ENTERING GRADE _____ IN SEPT. 2010	CHECK ONE <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	SPECIAL NEEDS <input type="checkbox"/> YES <input type="checkbox"/> NO * If YES, a one-on-one educator must be provided at student's expense
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MEDICAL INFORMATION -- LIST ANY ALLERGIES OR REQUIRED MEDICATION.

FAMILY DOCTOR	PHONE NUMBER	HEALTH CARD NUMBER
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I hereby release Theatre Ancaster from all claims for damages arising from any accident or injury which is caused or arises from participation of the applicant hereon during any program. Permission is hereby granted to Theatre Ancaster and its representatives to transport my child to a local doctor or hospital for medical treatment if necessary.

Signature of Parent/Guardian

MOTHER/GUARDIAN'S FULL NAME	HOME PHONE NUMBER	CELL/BUSINESS PHONE
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FATHER/GUARDIAN'S FULL NAME	HOME PHONE NUMBER	CELL/BUSINESS PHONE
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EMERGENCY CONTACT PERSON'S FULL NAME	HOME PHONE NUMBER	CELL/BUSINESS PHONE
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<u>Current Clothing Sizes for General Costuming Purposes</u>		
Pants: _____	Shoe Size: _____	T-Shirt Size (circle): Youth XS S M L Adult S M L XL

<u>PLEASE LIST PREVIOUS THEATRE EXPERIENCE BELOW:</u>	
Singing:	_____
Dancing:	_____
Acting:	_____

<u>SESSION</u> <u>(circle one)</u>	<u>DATES</u>	<u>Total PRICE</u>	<u>or 1st Installment</u>	<u>2nd Installment</u>
<u>BROADWAY</u> <u>PROGRAM</u> Ages 10-13	September 11th 2010- January 30th, 2011 9:30 am - 12:00 pm	\$450.00 Dated Sept. 1, 2010	\$225.00 Dated Sept. 1, 2010	\$225.00 Dated Nov. 1, 2010
<u>SKILL BUILDERS</u> <u>PROGRAM</u> Ages 7-13	September 11th 2010- December 18th, 2010 1:00 pm - 3:00 pm	\$250.00 Dated Sept. 1, 2010	\$125.00 Dated Sept. 1, 2010	\$125.00 Dated Nov. 1, 2010
<u>SKILL BUILDERS</u> <u>PROGRAM</u> Ages 7-13	February 26th 2011- June 4, 2011 10:00am - 12:00 pm	\$250.00 Dated Feb. 1, 2011	\$125.00 Dated Feb. 1, 2011	\$125.00 Dated Apr. 1, 2011

With your permission, we would like to use photographs and video for publicity purposes. Thank you.

I give my permission to use any photographs/videography.

Signature: _____

How did you find out about the Stage 2 Saturdays Program?

**We require that ALL cheque payment be submitted with registration
(either one lump sum, or two cheques with the installment plan).**

Registration forms are processed in order of arrival with payment.

We recommend hand delivery so that we receive your form sooner.

Please drop off OR mail your completed registration form with a cheque payable to

Theatre Ancaster to:

Nupi Gokhale

Director of Youth Programming—Theatre Ancaster

739 Montgomery Drive, Ancaster, ON, L9G 3H6