



2017-18 ACADEMY - REGISTRATION FORM

For students who are under the age of 18 *PLEASE PRINT

Please check one: New student Returning student

NAME OF STUDENT: _____

Date of Birth: _____ AGE: _____ GRADE: _____ M/F: _____

Parent/Guardian: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Parent's email: _____

Home Phone: _____ Mobile: _____ Business: _____

YOUTH PROGRAMS (for elementary and secondary students)

Please select your class(es) below, along with the session(s) of your choice where applicable - Fall, Winter, Spring

*DISCOUNTS: Book more than one class or more than one child, and save \$20 on each additional class, term, or student booked!

A. SATURDAY YOUTH DRAMA/VOCAL CLASSES Fall: Sept 9/17 to Nov 4/17 Winter: Jan 6/18 to Mar 3/18 Spring: Apr 7/18 to June 9/18

COURSE OPTIONS	TIME	TERM (circle)	FEE (per term)	TOTAL FEES
<input type="checkbox"/> Playtime Theatre (ages 5 to 7)	9 am - 10 am	F W S	Regular: \$105 + HST Subscribers: \$85 + HST	_____
<input type="checkbox"/> Discovery Drama (ages 8 to 10)	10:15 - 11:45 am	F W S	Regular: \$135 + HST Subscribers: \$115 + HST	_____
<input type="checkbox"/> Vocal Discovery (ages 8 to 10)	12 - 1:30 pm	F W S	Regular: \$135 + HST Subscribers: \$115 + HST	_____
<input type="checkbox"/> Vocal Development (ages 11 to 17)	10:15 - 11:45 am	F W S	Regular: \$135 + HST Subscribers: \$115 + HST	_____
<input type="checkbox"/> Development Drama (ages 11 to 17)	12 - 1:30 pm	F W S	Regular: \$135 + HST Subscribers: \$115 + HST	_____

PLEASE NOTE: If you are a NEW student who was referred to the STC by another student or parent, please provide the name of the person who provided this referral. _____ **TOTAL** _____

STC is considering the development of an STC ACADEMY t-shirt.
Would you be interested in purchasing a t-shirt for your child/teen? (approx. \$15 to \$20) YES NO **TOTAL FEES** _____

Would you like to receive e-mail information about other Sudbury Theatre Centre programs? YES NO

FOR OFFICE USE ONLY

DATE PAYMENT RECEIVED: _____

Method of Payment: CASH / CHEQUE / VISA / MASTERCARD / AMERICAN EXPRESS / OTHER _____

Name on Cheque: _____

Credit Card No.: _____ 3-digit Card ID: _____ Expiry: _____ / _____