



WEEKDAY MATINEE REQUEST FORM ~ SCHOOLS 2023-24 SEASON

Please complete this form and email to r.mcintosh@yestheatre.com
*Any questions? Contact Education Director Ralph McIntosh at 705 674 8381 x6

NAME OF SCHOOL: _____	School phone #: _____
Contact Person: _____	Secretary's Name: _____
E-mail: _____	E-mail: _____
Cell Phone: _____	School Fax: _____

MAINSTAGE PRODUCTION	DATES	START	END (approx.)	CONTENT	PRICING	
WINTER 2024	1939	Wednesday Mar 20	10:00 AM	1:30 PM	Grade 9+	\$25/seat (HST included)
		Friday Mar 22	10:00 AM	1:30 PM		
		Thursday Mar 28	10:00 AM	1:30 PM	(times include additional programming	
		Friday April 5	10:00 AM	1:30 PM	before and after the performance)	

REQUESTED PRODUCTION

Preferred Date and Time _____

2nd Choice Date and Time _____
(required) We will confirm the date and time of your production within one week of receiving this form.

Number of Students* _____	Grades _____	# of Students x cost per seat = _____	TOTAL COST
Number of Adult Supervisors _____	*Teachers and chaperones are admitted at no cost. (Elementary: 1 per 10-15 students / Secondary: 1 per 20)		Payment is due one week before your matinee.
Total # of seats requested _____	(students + adults)		

***PLEASE NOTE:** a) School groups of fewer than 10 students are required to pay \$25 per seat (staff included).
b) Schools are required to pay for the number of seats they reserve, even if fewer students attend.
Changes to seating reservations must be received no later than 48 hours in advance.
Contact Ralph McIntosh at (705) 674 8381 x6 with any questions about pricing or payment plans.

SPECIAL SEATING NEEDS

*IMPORTANT: Please identify any special seating requests, including wheelchairs. _____

FOR OFFICE USE ONLY

Method of Payment:	CASH / CHEQUE / VISA / MASTERCARD / AMERICAN EXPRESS / OTHER _____		
Name on Cheque:	_____		
Credit Card No.:	_____	3-digit Card ID: _____	Expire: _____ / _____