



WEEKDAY MATINEE REQUEST FORM ~ SCHOOLS 2024-25 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: _____

FALL 2024 MAINSTAGE PRODUCTION	DATES	START	END (approx.)	CONTENT	PRICING
Olvier!	Thursday Nov 28	10:30 AM	1:00 PM	Grade 4 +	\$15/seat (HST included)
	Wednesday Dec 4	10:30 AM	1:00 PM		
	Thursday Dec 12	10:30 AM	1:00 PM		

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 = _____

Number of Adult Supervisors _____ *Teachers and chaperones are admitted at no cost.
(Elementary: 1 per 10-15 students / Secondary: 1 per 20) **TOTAL COST**
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 \$15 for students AND staff.
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: _____ / _____