



## 2025-26 STUDENT INFORMATION FORM

\*Please **CIRCLE** the program(s) you are registering for.

Playtime (6-7) / Discovery Drama (8-10) / Musical Theatre Discovery (8-10)  
Development Drama (11+) / Musical Theatre Development (11+)

NAME OF STUDENT: \_\_\_\_\_

School: \_\_\_\_\_ GRADE as of Sept. 2025: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

\*a 3rd person we can call if we cannot reach the 1st or 2nd Parent/Guardian listed on the Registration Form

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Business: \_\_\_\_\_

Does your child have any allergies, medical conditions or special needs? **YES NO**

If yes, please provide further details in the space below. You may also contact our instructors directly at:

Sophia Papineau

Blaine Thornton

Holli Ward

Playtime Theatre

Discovery/Development Drama

Musical Theatre Discovery/Development

[playtime@sudburytheatre.com](mailto:playtime@sudburytheatre.com)

[drama@sudburytheatre.com](mailto:drama@sudburytheatre.com)

[vocals@sudburytheatre.com](mailto:vocals@sudburytheatre.com)

Does the student have any previous drama or singing experience? Do they play a musical instrument? If yes, please elaborate.

Has the student participated in anything involving dance or movement? If yes, please elaborate.

Does the student have any other special talents or skills you would like us to know about?

### MEDICAL INFORMATION

\*This information will be kept strictly confidential - for instructor use only.

Family Physician: \_\_\_\_\_ Doctor's Office Phone # \_\_\_\_\_

Child's Health Card #: \_\_\_\_\_

Please return this Information form, along with the Student Registration Form and Release form, to [r.mcintosh@yestheatre.com](mailto:r.mcintosh@yestheatre.com)

Please contact Education Director Ralph McIntosh at 705 674 8381 ext 6 regarding any questions you may have about our programs.