



Director: Kim Belvedere Phone: 905-875-7674 Website: www.miltontheatre.ca E-mail: info@miltontheatre.ca or mytpinfo@gmail.com

c/o 563 Joyce Blvd., Milton, ON L9T 3C7

2011/2012 REGISTRATION FORM

Student: _____ M F

Address: _____

City: _____ Postal Code: _____

Parents' E-mail: _____

Student's E-mail: _____

Parents' Names: _____

Home Telephone #: _____ Parents' Cell/Business #: _____

Birthdate: _____ Age: _____

Age Programs: Shining Star 4 to 6 Mini Star 7 to 9 Junior 10 to 12 Senior 13 & Up

FALL

Musical Theatre Drama Company

Shining Star	\$295 + HST	Mon or Tue	5:30-6:30 p.m.
Mini Star	\$350 + HST	Mon or Tue	6:00-7:30 p.m.
Junior	\$475 + HST	Mon or Tue	6:00-9:00 p.m.
Senior	\$475+ HST	Mon or Wed	6:00-9:00 p.m.

Milton Vocal Performers (MVPs)

Mini Star	\$240 + HST	Tue	5:30-6:00 p.m.
Junior	\$395 + HST	Mon	5:00-6:00 p.m.
Senior	\$395 + HST	Wed	5:00-6:00 p.m.

SPRING - Theatre (March-June)

Shining Star	\$250 + HST	Tue	5:30-6:30 p.m.
Mini Stars	\$275 + HST	Tue	6:00-7:30 p.m.
Junior (10-13 years)	\$395 + HST	Tue	6:30-8:30 p.m.

Spring Sr. Co. (Audition ONLY) No Fees March - June

Programs:

Subtotal _____

HST 13% _____

TOTAL _____

Balance Paid by: Cheque Cash

Payments:
Registration _____

#1 Payment in Full _____

#2 Payment _____

#3 Payment _____

PAYMENT DUE AT REGISTRATION



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MEDICAL INFORMATION FORM

Name: _____ OHIP #: _____

Emergency Contact: _____ Telephone #: _____

Has your child ever suffered from asthma, heart problems, breathing problems or any other medical condition that may affect his/her ability to participate in this program?

Is your child on any medication? _____

Does your child have any allergies? Please specify.

Injury Waiver

Each student and his or her legal guardian(s) hereby release Milton Youth Theatre Productions and Directors, Teachers and Employees from claim for personal injury sustained in, on or about the facilities.

Signature of Parent/Guardian _____
Date

Photography & Video Waiver

Each student and his or her legal guardian(s) hereby release Milton Youth Theatre Productions the rights to all photography and video that may be taken by or for Milton Youth Theatre Productions during classes or performances, for use in advertising and promotion, including television coverage.

Signature of Parent/Guardian _____
Date

Parent Volunteers Needed: Please let us know if you are available and interested in the following volunteer positions:

Costume Coordinating and/or Dress Making

Set Building, Painting, Assembly at Production

Set Storage

Any other talents: _____