



## School Program Registration

Please email [info@travellingstage.com](mailto:info@travellingstage.com) with this information, or send it via fax to 905-493-5525.

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Program of Interest: \_\_\_\_\_

Preferred Date(s): \_\_\_\_\_

School Timetable (including Classroom Teacher(s) and Number of Students per class):

\_\_\_\_\_  
\_\_\_\_\_

Single Booking or Multi-Visit? \_\_\_\_\_ If Multi-Visit, how many sessions? \_\_\_\_\_

Would you like us to create the daily schedule? If not, please indicate schedule below:

\_\_\_\_\_  
\_\_\_\_\_

Would you like instruction in French or English? \_\_\_\_\_

Do you have a Guest Artist you'd like to request? \_\_\_\_\_

Special Notes about School: \_\_\_\_\_

**TEL: 416-317-8950**

**FAX: 905-493-5525**

**[info@travellingstage.com](mailto:info@travellingstage.com)**

**[www.travellingstage.com](http://www.travellingstage.com)**

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Invoice #:

Account #:

Contract Sent:

Guest Artist: