

ACTOR'S NAME: _____

GRADE: _____ DIV: _____ Teacher: _____

SCHOOL: General Gordon Elementary

Today's date: _____ Age: _____ Birthdate: _____

Address: _____

City: _____ Postal code: _____

Parent Contact Information

Parent/Guardian 1: _____ W/Cell phone: _____

Parent/Guardian 2: _____ W/Cell phone: _____

Program TitleProgram title: Playbuilding Location: General Gordon ElementaryDate & time: 10 Tuesdays Sept. 23 - Dec. 9, 2025* (3:15 to 4:45 pm) * There will be no sessions on Sept. 30 and Nov. 11, 2025.Our family performance will be Dec. 9, 2025.

Check one:

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Grades 4-7 3:15 pm to 4:45 pm (Tuesdays, Sept. 23 - Dec. 9 2025) 10 sessions (no sessions Sept. 30 and Nov. 11 due to school holidays)

*If Extra rehearsal time is called, no extra fee is required. (TBA).***Program Fee Spring 2025:**

Check one.

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Actors (Grades 4-7) \$250.00 for 10 sessions & including any extra rehearsal(s).

*Fee includes VYT Family Membership (5\$, included– valid for one year).***Add charitable donation* (optional):** *VYT is a Registered Charitable Organization (#119282416 RR0001). As a donor, you will receive a receipt for tax purposes.

Check one:

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Yes, I'd like to make a donation to the VYT:

Donation amount enclosed: _____ Receipt #: _____

Office use only☐

No thank you, not at this time.

Payment: *page 2 - Vancouver Youth Theatre Registration Spring 2025*

Enclosed is my payment:	<input type="checkbox"/>	cheque	<input type="checkbox"/>	Visa
or Interac e-Transfer to vyt@shawbiz.ca	<input type="checkbox"/>			
<i>Mastercard not accepted</i>				
Card #				
Expiry Date				
				<i>Signature</i>
Name on card (please print clearly)				
How did you hear about VYT?				
Email address:				

TO REGISTER with VISA (only): Call 604-877-0678, or mail with printed Visa number
TO REGISTER by cheque or Visa: Mail cheque and completed registration form to VYT's mailing address: #476-6647 Fraser Street, Vancouver, BC V5X 3T6. **You can also e-mail your completed form with payment information or Interac e-Transfer to vyt@shawbiz.ca**

Fee Waivers: We encourage the participation of young people from diverse socioeconomic communities. If your family needs assistance, ask us about bursaries and scholarships which we provide within our season's resources. We are grateful to our community partners and sponsors!

Special Needs: VYT's programs involve teamwork towards a final performance. Actors with special needs or certain learning disabilities may require an extra volunteer. Please let us know so that we can help towards accomodating this.

Family Membership: VYT is a non-profit society and families are required to be members. Membership is \$5 per family per year, and is included in the program fee. Membership can be renewed annually and members can vote at VYT's Annual General Meeting, held once a year usually in the fall (date to be confirmed).

Refund Policy: No refunds will be given for withdrawal from programs unless the request is received a minimum of one week prior to the beginning of the registered program. Cancellations require a \$20 administration fee.

Program cancellation Policy: Although cancellations are rare, VYT reserves the right to cancel a program that does not have sufficient enrolment.

Donations welcome

**VYT is a Registered Charitable Organization (#119282416 RR0001). As a donor, you will receive a receipt for tax purposes.*

Sponsorships

Your company may want to sponsor a VYT program or season by donating funds or in-kind donations of goods or services to enhance the quality of the program. VYT will provide an in-kind donation receipt for this.