

REGISTRATION SUBSIDY FORM

This form must be filled out by the custodial parent of the child registered in the program before classes commence. The subsidy is intended for low income families. Subsidies are granted based on an honor system of 'pay what you can afford closest to the amount being charged.' All subsidies are granted at the discretion of the Artistic Director/Board of Directors. Information will be kept in confidence.

DATE:		
CHILD'S NAME:		-
PROGRAM:		
SCHOOL:	(if request is for a school program)	
PROGRAM FEE:		
SUBSIDY REQUEST		
Please indicate the amount you are able to pay, closest to the full amount of the program.		
\$		
Please indicate the dollar amount you are requesting be subsidized.		
\$		
Parent	Ad	dministration

RPO Shaughnessy, PO Box 41018, Port Coquitlam, V3C 5Z9 Phone: 778-766-3882

Web: <u>www.theatrixyoutheatre.com</u> **Charitable Tax Number:** 892834185