



PERFORM! Performance Request Form

Submit this form to request a performance at your school through the PERFORM! program.

School Name:

School Board

Contact Name:

Contact's Email (at school):

Grade Levels Participating in Activity:

Number of students attending the performance:

Name of Performance:

Number of Performances:

First Choice of Date (format: YYYY-MM-DD):

Second Choice of Date (format: YYYY-MM-DD):

Do you want the artists to host a Q&A session after the performance?

Are you interested in booking workshops as a compliment to this performance?

Payment Method: Full payment due upon approval of activity by coordinator.

Please note any scheduling information that should be taken into consideration.



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Contact's Primary Subject Taught

Contact's Secondary Subject Taught

Additional Notes:

Contact Information

First Name:

Last Name:

Address:

City:

Province:

Postal Code:

Country:

Phone Number:

Cell Phone:

Email Address:

Page 2 of 2

Please submit this form by email to PERFORM! Coordinator Pamela Halstead at coordinator@performns.ca.