



**TORONTO STUDENT EDUCATIONAL PROGRAMS**

COMPANY NAME: .The Elgin and Winter Garden Theatre Centre  
WEBSITE: .....  
ADDRESS: .....  
TELEPHONE: .....  
FAX: .....  
CONTACT NAME: .....  
TITLE: .....  
DIRECT LINE: .....  
EMAIL: .....

**BRIEF DESCRIPTION OF ATTRACTION**

**DESCRIPTION OF EDUCATIONAL PROGRAMS**



**EDUCATIONAL PROGRAM DETAILS**

Name of educational program: .....

Season(s) the educational program offered: .....

Minimum/ maximum group size: .....

Available languages of program: ..... English .....

Cost(s) of your educational program(s): .....

Estimated time required for program: .....

Cancellation policy details: .....

Comp policy details: .....

Offer student friendly dining options on site?: .....

Offer both lunch & dinner? (Provide price range): .....

Offer vegetarian, vegan or gluten-free menu items?: .....

.....

Group dining area available?: .....

Wheelchair accessible? Please provide details on accessibility:  
.....  
.....

Motor coach parking available on site?: .....

If Yes, is there a charge?: .....

**EDUCATIONAL PROGRAM – CURRICULUM MATCHING**

Recommended age/ grade for program: .....

Canadian Primary Category: .....

Canadian Secondary Category: .....



American Primary Category: .....

American Secondary Category: .....

**EDUCATIONAL PROGRAM STANDARDS**

Canadian National Standard: .....

Provincial Standard: .....

U.S. National Standard: .....

U.S. State Standard: .....