



2005 Survey of Service Industries: Performing Arts

If necessary, please correct pre-printed information below.



0001	Legal name		0004	Address (number and street)	
0002	Business name		0005	City	
0021	Title of contact		0006	Province/ Territory or State	
0008	First name of contact		0053	Country	0007 Postal code/ Zip code
0028	Last name of contact		0010	Language preference	1 <input type="checkbox"/> English 2 <input type="checkbox"/> French

This information is collected under the authority of the *Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.*

COMPLETION OF THIS QUESTIONNAIRE IS A LEGAL REQUIREMENT UNDER THIS ACT.

A - Introduction

Survey Purpose

This survey collects the financial and operating data needed to develop national and regional economic policies and programs.

Data-sharing Agreements

In an effort to reduce reporting burden, Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. The data are kept confidential and used for statistical purposes only. Please see the enclosed reporting guide for details of these agreements.

Confidentiality

The *Statistics Act* protects the confidentiality of information collected by Statistics Canada. Please see the enclosed reporting guide for more information.

Fax or Other Electronic Transmission Disclosure

Statistics Canada advises you that there could be a risk of disclosure during the facsimile or other electronic transmission. However, upon receipt, Statistics Canada will provide the guaranteed level of protection afforded all information collected under the authority of the *Statistics Act*.

Reporting Instructions

- Report for **all** operation(s) and/or location(s) pre-printed in the above address area. If it is not possible to report for the above business unit(s), please explain the reason(s) in the **Comments** section at the end of the questionnaire.
- When precise values are not available from your records, estimates are acceptable.
- For further information about this survey and definitions, please consult the enclosed reporting guide.

Please return the questionnaire within 30 days.

**Please mail the completed questionnaire in the enclosed envelope
or fax it to Statistics Canada at 1 888 883-7999.**

Lost the return envelope or need help? Call us at **1 888 881-3666** or mail to:
Statistics Canada, Operations and Integration Division, 120 Parkdale Avenue, Ottawa, Ontario K1A 0T6



B - Main Business Activity

Please check the **one** category from questions 1 to 10 which most accurately describes your organization:

1. 711111 0087 **Theatre (except musical) company (include festival with in-house company)**
2. 711112 0088 **Musical theatre company**
3. 711112 0089 **Dinner theatre**

4. **For theatre companies (questions 1, 2 and 3), please specify the language of performances.**

Check all that apply.

0090 1 English 2 French 3 Other (please specify): 0091 _____

5. 711112 0092 **Opera company**

6. 711120 0093 **Dance company**

Musical group or artist

7. 711130 0094 1 Symphony orchestra 2 Chamber music group 3 Choral music group

4 Independent musical artist, musician, or vocalist (**include** popular music artists and opera singers) 5 Popular music group (**include** country, rock, pop, blues or jazz)

6 Other musical group (please specify): 0095 _____

8. 711190 0096 **Multidisciplinary**

9. 711190 0097 **Other performing arts company (include circus, ice skating show, variety show, magic show, etc.)**

10. 0098 **None of the above**

If you checked "None of the above", please call **1 888 881-3666** for further instructions.

C - Reporting Period Information

Please report information for your **fiscal year** (normal business year) ending between April 1, 2005 and March 31, 2006. Please indicate below the period covered by this questionnaire.

From 0011 YYYY MM DD To 0012 YYYY MM DD

2. If you **did not operate** this business unit for a **full year**, please check the reason(s) below:

0031 1 Seasonal operations 2 New business 3 Change of fiscal year 4 Change of ownership 5 Ceased operations 6 Temporarily inactive

**Please complete only the questions that are applicable to your business.
When precise values are not available from your records, estimates are acceptable.**

D - Revenue

		CAN\$
1. Sales (a detailed sales breakdown will be requested in Section F) {If applicable}	2299	
2. Grants and subsidies	2068	
3. Royalties, rights, licensing and franchise fees	2022	
4. Investment income (dividends and interest)	2097	
5. Other revenue (please specify): 2001	2077	
6. Total revenue (sum of questions 1 to 5)	2098	

E - Expenses

		CAN\$
1.	Salaries and wages of employees who have been issued a T4 statement	3010
2.	Employer portion of employee benefits (include employer contributions to pension, medical/life insurance plans, employment insurance, etc.)	3040
3.	Commissions paid to non-employees	4466
4.	Professional and business service fees (e.g., legal, accounting)	4315
5.	Outsourcing (include work contracted out, freelancers, payments to personnel suppliers, etc.)	3060
6.	Payments for services provided by your head office	4555
7.	Cost of goods sold – if applicable (purchases plus opening inventory minus closing inventory)	5721
8.	Office supplies	3301
9.	Rental and leasing (include rental of premises, equipment, motor vehicles, etc.)	4115
10.	Repair and maintenance (include janitorial services, equipment, motor vehicles, etc.)	4178
11.	Insurance (include professional liability, motor vehicles, etc.)	4350
12.	Advertising, marketing and promotions (report charitable donations at question 22)	4365
13.	Travel, meals and entertainment	4370
14.	Utilities (include gas, heating, hydro, water)	4066
15.	Telephone and other telecommunication expenses	4101
16.	Property and business taxes, licences and permits	4410
17.	Royalties, rights, licensing and franchise fees	4440
18.	Delivery, warehousing, postage and courier	4179
19.	Financial services fees (e.g., bank and credit card charges)	4325
20.	Interest expenses	4630
21.	Amortization of tangible and intangible assets	4520
22.	Charitable donations	4521
23.	Bad debts	4542
24.	All other expenses ⁴⁵³¹ (please specify):	4569
25.	Total expenses (sum of questions 1 to 24)	4699
26.	Corporate taxes (if applicable)	4600
27.	Gains (losses) and other items (include write-offs, foreign exchange, share of partnership income, etc.)	4601
28.	Net profit/loss after tax and other items	2304

F - G - H - I - J - K - Not applicable

L - Certification

I certify that the information contained herein is complete and correct to the best of my knowledge.

Signature of authorized person	Title 0014	0015	Date	
		YYYY	MM	DD
		<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of person to contact for further information: 0026	0013	First name <input type="text"/>
1 <input type="checkbox"/> Mr. 2 <input type="checkbox"/> Mrs. 3 <input type="checkbox"/> Miss 4 <input type="checkbox"/> Ms	0054	Last name <input type="text"/>

E-mail address 0018	Web site address 0020
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Telephone number 0017	Extension number 0027	Fax number 0016
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How long did you spend collecting the data and completing this questionnaire?	9910	Hour(s) <input type="text"/>	9909	Minutes <input type="text"/>
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M - Comments

We invite your comments below. Please be assured that we review all comments with the intent to improve the survey.

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9916 _____

FOR
INFORMATION
ONLY

Thank you for completing this questionnaire. Please retain a copy for your records.

Statistics Canada's publications are available for use in all major libraries.
As well, please visit our Web site at www.statcan.ca.

If you need help, please contact us at **1 888 881-3666**.