



# Registration ONLINE WORKSHOPS

Phone: 514-483-5526 Email: info@msopa.com

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2<sup>nd</sup> Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal: \_\_\_\_\_

### Casting Information

Age: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ Availability: \_\_\_\_\_

D.O.B. (Under 18 yrs) \_\_\_\_\_

### COURSES/ WORKSHOPS

| Course (s)                | Day       | Course Dates          | Time(s)   | Tuition Fee |
|---------------------------|-----------|-----------------------|-----------|-------------|
| TEENS<br>Actors' workshop | Saturdays | Jan 22- Mar. 19, 2022 | 12-130 PM | 225.00      |

### Total amount

|   |        |
|---|--------|
| Payable to the Order:<br><b>JOSA MAULE</b><br>E-mail transfer or Paypal | 225.00 |
|---|--------|

**Receipt by Email: Client/Student are responsible for attendance and payments of their course(s).** Amount is non-refundable once courses begin, but maybe credited towards courses up to a period of one year. **Refund Policy:** Cancellation must be given 10 days prior to commencement of courses for full refund. **Payment Instalments:** all payments must be received prior to the workshop date stated above.

Student Signature: \_\_\_\_\_

JOSA MAULE (MSOPA): *Josa Maule* \_\_\_\_\_

### APPLICABLE FOR YOUNG ACTORS WORKSHOP

Parent Name (s): \_\_\_\_\_ Signature: \_\_\_\_\_

Parent Name (s): \_\_\_\_\_ Signature: \_\_\_\_\_