



# Registration Form

**LOCATION: 2741 Notre Dame W. Mtl., H3J 1N9**

**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
FOUNDATION 2	Wednesdays	Sept. 04-Oct. 16	@7-930 pm 5th & 6th class 7-10pm	430.00

### Total amount

<p>save 10 % Register by Aug 15, 2024</p> <p>Payable to the Order: JOSA MAULE E-transfer: info@msopa.com or PayPal,</p>	<p><b>387.00</b></p>
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**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): \_\_\_\_\_