



# RE- Registration

**ONLINE: ZOOM**

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

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

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

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

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

Email: \_\_\_\_\_

## COURSES/ WORKSHOPS

Course (s)	Course Days	Course Dates	Time(s)	Fee
VOICE OVER 2	WEDNESDAY	Nov. 13-DEC. 04, 2024	7-830	\$120.00

	<b>Total amount</b>
Payments Payable by E-mail transfer or Paypal JOSA MAULE info@msopa.com	<b>120.00</b>

**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): \_\_\_\_\_

### APPLICABLE FOR YOUNG ACTORS WORKSHOP

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

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

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

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