



117-1705 Avenue Victoria, St-Lambert J4R 2T7

(450) 671-3258

www.maisondesartsrivesud.org



REGISTRATION FORM

Version to be sent by mail.
Fill in your information in the spaces below.

PROCEDURE:

1. Please fill in the form on your computer, print it and sign it.
2. Enclose your payment by cheque or money order.
3. Send the completed form and payment by mail or deposit them in the mail box at the Maison des Arts Rive-Sud workshop.

SESSION AUTUMN WINTER SPRING SUMMER

STUDENT INFORMATION

Last Name First Name Telephone Email
Address
No. Apt. # Street City Postal code

FOR A CHILD'S REGISTRATION, PLEASE INDICATE THE PARENT TO BE CONTACTED:

FATHER MOTHER OTHER LAST NAME: FIRST NAME:

CHOICE OF COURSE/WORKSHOP/CONFERENCE

It is possible to register for 1 or 2 courses on this form for the same student.

1st Course Title		Code	Cost of course	\$	Method of payment*
Professor	Day	Hour	Cost of material (if indicated)	\$	
2nd Course Title		Code	Cost of course	\$	Cash Cheque Money Order
Professor	Day	Hour	Cost of material (if indicated)	\$	
If you wish to make a donation to the Maison des Arts Rive-Sud, please indicate the amount here. Tax receipts will be provided for donations of \$20 or more.				\$	
TOTAL AMOUNT TO BE PAID				\$	

Responsibility: By signing this registration form, the student or the parent who is responsible for the student, releases the Maison des Arts Rive-Sud from all claims of physical or material loss due to activities relating to the present registration.

DATE

SIGNATURE

* Each registration form must be accompanied by the appropriate payment, either to the above postal address or in the workshop mailbox. The registration is considered official and complete upon reception of full payment.

