



Richmond Centre for Disability

"Promoting a new perspective on disability"



Creative Arts Course Registration Form 2020



First & Last Name: _____

Phone: _____ Email: _____

Address: _____

Emergency contact:

Contact person: _____

Relationship: _____

Telephone: _____ Cell: _____

FOR OFFICE USE ONLY

Course Costs \$ 20.00 _____

Cheque Cash Visa Master Debit

Term	Period	Receipt #	Received by	Date
1 <input type="checkbox"/>	Jan 20 - Mar 16	_____	_____	_____
2 <input type="checkbox"/>	Apr 20 – Jun 15	_____	_____	_____
3 <input type="checkbox"/>	Sep 14 - Nov 9	_____	_____	_____
4 <input type="checkbox"/>		_____	_____	_____

Note: