



Fall Art Classes—2009

Art for Kids

Name: _____ Age: _____

Name of parent or guardian who will be attending: _____

Street Address: _____

City: _____ Postal Code: _____

Home Telephone: _____

Emergency Contact and Number: _____

E-mail: _____

Total: \$50.00

Method of Payment: (please check one)

Visa: _____ MC: _____ Debit: _____ Cheque: _____ Debit: _____

If paying by Credit Card:

Card Number: _____ Expires: ____/____

Name of Credit Card Holder: _____

*All participants must abide by Peel Heritage Complex rules and regulations. Failure to comply will result in dismissal from the program. The decision to dismiss a participant rests solely with Peel Heritage Complex staff. There will be no exceptions. Participants who have been asked to leave will be reimbursed 75 per cent of the registration fee. In order to register, participants are required to sign below, indicating agreement to the above terms.

X _____
Signature Date