



## Monart Art School of Ottawa

2445 St.Laurent Blvd., Suite B244

Ottawa, Ontario K1G 6C3

613-260-0483

vickysartstudio.com

### Registration

#### Basic Information

Student's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Class Title \_\_\_\_\_

Time & Day \_\_\_\_\_

#### How did you hear about Monart?

\_\_\_\_\_

#### Emergency Information (kept confidential)

Parent/Guardian \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Known Allergies \_\_\_\_\_

I hereby give Monart staff permission to see that my minor child receives medical attention in the event of an emergency and I have read and acknowledge my acceptance of the Tuition and Enrollment Policy.

I give permission to Monart to contact me periodically by email about special events and schedule changes.

Signed \_\_\_\_\_

Date \_\_\_\_\_