Registration Form

Please print clearly.

REELTALENTS T.O

Have you applied to Reel Talents T.O before ? ☐ yes ☐ no

Date of Birth
Day Month Year

Last Name

First Name

Middle Name

Number/Street

Apartment

City

Postal Code

Province

Business Phone *(include area code)* Ext

Home Phone *(include area code)*

Please provide both phone numbers so we can contact you if necessary.

E-mail address

Course

D D M M Y Y
Course Start Date

Fee (includes HST

D D M M Y Y
Course End Date

This form must be filled out in full, and payment must be included.

Payment Information

☐ **Visa** ☐ **MasterCard** ☐ **American Express**
☐ **cheque*** ☐ **money order*** ☐ **debit card†**

Card Expiry Date

Card Number

Cardholder name (print) Signature

Full payment must accompany registration form.

* Cheques and money orders must be payable to Reel Talents T.O (no post-dated cheques)

† Debit cards can be used for in-person registration only.