

# 少年儿童艺术学校戏剧部 School of Young Talents Junior Drama Department

## **HOLIDAY PROGRAM (NOVEMBER 2018)**

Join The Ant and The Grasshopper with all of their forest friends as they prepare for winter in this holiday workshop! Students will devise scenes and make props themselves.

### Course Description (Ages 8 – 12yo)

School of Young Talents (SYT) offers an unique theatre-meets-art

experience conducted by experienced teachers from both Junior Drama and Junior Art Departments.



## Course Dates/Time

19, 20, 21, 22, \*23 November 2018 (1.00pm – 5.00pm)

\*Parents are invited to a short performance on 23 November, Friday at 5.00pm – 5.30pm.

#### Course Fee

Child's Name

\$450.00, all materials inclusive.

A registration fee of \$32.10 is applicable to new applicants who are not NAFA students.

Register at our office with the completed form, a copy of child's birth certificate and a cheque (payable to NANYANG ACADEMY OF FINE ARTS) during the stipulated enrolment period. Limited vacancies, first-come, first-served!

### Please turn over form to complete the declaration. 请在填写表格前阅读规则。

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Date of Birth 出生日期	DD/MM/YYYY					Ge	Gender 性别												
Nationality 国籍	( ) Singapore Citizen ( ) Singapore PR ( ) Others:																		
Birth Cert /Passport*	*Please enclose birth cert/passport. 请附上相关文件.																		
出生证/护照号码*																			
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Parent's name 家长姓名																			
Mailing Address 地址																			
									Postal Code 邮编										
Mobile no. 手机号码																			
Home no. 住家号码																			
Email 电邮箱																			
				- 10	y <del></del>														
How do you come to know about this course? 消息来源																			
()Newspaper 报章 ()Internet 网上 ()Friends 朋友介绍 ()Others 其它																			

# **RULES AND REGULATIONS**

Declaration							
Please tick the boxes below:							
	I hereby declare that the information	provided is true.					
	I understand that every care will be course(s) and thus will not hold the Art Department responsible for any r	staff or the Management of NAFA J	unior Drama and				
	Any medical conditions that may inte be declared.	rfere with learning in a group classro	oom setting must				
	Please indicate NIL, or describe the co	ondition, if any:					
0	I give my consent for NAFA to collected Academy.	ct and use my personal data for up	odates about the				
	Name of Parent	Signature of Parent	Date				