

Classes Winter 2018

January - March 2018

Register for CREATIVE VILLAGE STUDIO classes Online

MyCommunityHub.ca

You can register for our programs online & pay? It's very simple:

- CREATE AN ACCOUNT
- FIND AND REGISTER FOR THE ACTIVITY, BY NAME OR NUMBER:

Simply enter the 4-Digit number beside the class name in the brochure, in the Search box at www.mycommunityhub.ca and you will be instantly directed to the class listing.

- PAY (Add To Cart)

Your receipts will always be available online anytime you need it.

Registration opens online and in person January 03, 2018 at 10:00AM

SKIP THE LINE AND REGISTER ONLINE









CARD MAKING

#6343

Explore various card-making techniques including: Stamping, printing, painting, photo transferring and paper-cutting.

MONDAYS 1:30PM - 3:30PM January 15 - March 26, 2018 (* No classes Feb. 19 for Family Day Weekend)

10 week session - \$110

ABSTRACT PAINTING

#6341 [Mon] #6342 [Thu]

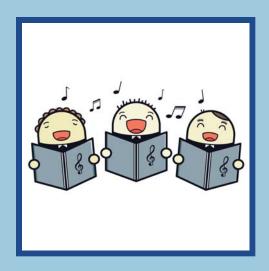
Learn how to use formal patterns, shape structures, lines and colours. Break down objects into basic forms to create pure abstraction.

MONDAYS 1:00PM - 3:00PM (* No classes Feb. 19 for January 15 - March 26, 2018 Family Day Weekend) - OR -

THURSDAYS 1:00PM - 3:00PM January 18 - March 22, 2018

10 week session - \$110





CHOIR #6344

Come join an organized group of singers to perform various musical numbers together. Music and it's positive influence helps build self empowerment in a non-judgemental and casual environment.

THURSDAYS 6:00 - 7:30PM January 18 - March 22, 2018

10 week session - \$120

MUSIC APPRECIATION

#6345

Please come and join us for our music appreciation class to explore music instrument use, favourite songs, rhythm and movement.

FRIDAYS 10:30 - 11:30AM January 19 - March 23, 2018

10 week session - \$50





SCULPTURE

#6346

Explore forms through tactile manipulation of clay, plasticine and plaster using various sculpting techniques.

SATURDAYS 12:00PM - 1:30PM January 13 - March 24, 2018 (* No Classes Feb. 17 for Family Day Weekend)

10 week session - \$140

iPAD & DIGITAL TECHNOLOGY #63

#6349 [Tues] #6348 [Sat]

Learn using ipads, how digital technology, Internet, and email can assist and enrich various aspects of our life.

SATURDAYS 2:00PM - 4:00PM January 13 - March 24, 2018

(* No Classes Feb. 17 for Family Day Weekend)

- OR -

TUESDAYS 1:00PM - 3:00PM January 16 - March 20, 2018

10 week session - \$120







CONTACT US

4895 Dundas Street West Etobicoke, ON, M9A 1B2

(647) 351 4362 creativevillagestudio @ cltoronto.ca

www.creativevillagestudio.ca

• @CreativeVillageStudio







For office use of	Supplement Form Com Attached	ntal Information pleted N/A	07-03-01A P Release Forr Attached		Payment Made Cheque Debit Credit Visa	□ □ M/C
	completed registrationey orders payab			Creativ		Studio
By mail or in per Creative Village 3 4895 Dundas Str Toronto, ON M94 647-351-4362	Studio eet West,					
Participant's Full Na	me:					
Date of Birth (m/d/y):					
Street Address:						
City:				Postal Code:		
Full Name of Paren	(s) / Guardian:					
Full Address (if diffe	rent from that of Parti	cipant):				
Phone Numbers:	Home:					
	Work: (mother):	Nork: (mother): (father):				
	Cell: (mother):		(1	ather):		
E-mail Address(es)						
Emergency Contact:	Name:	Contac	t Number	Relatio	nship to individua	al
Medical or Behavior as conditions c	L pural Alerts (More in nange.)	formation to be p	provided on Su	pplemental inf	ormation form f	or first registration
PLEASE ENSUR	E YOUR FAMILY M	IEMBER CARRI	ES EMERGE	NCY ID WHEN	I ATTENDING	CLASS.
community excursion Living Toronto of ar	on for my / our child / ns if necessary during y responsibility for an er to be photographed	g their attendance y injuries that may	occur on any c			
Parent/Guardian:	(print name & provid	o cianaturo)	Witness:	(print non	ne & provide signat	

Date: _

Date:



SUPPLEMENTAL INFORMATION FORM

Creative Village Studio

To be completed upon initial registration and as conditions change (attach to registration form) – This information is requested to help us to better support the individual registering for classes. Please complete as much as you feel comfortable sharing. This information will not be shared outside of Creative Village Studio.

By mail or in person: Creative Village Studio 4895 Dundas Street West, Toronto, ON M9A 1B2 647-351-4362

Individual's Full Name:					
Health Card Number:					
Alternate emergency contact: (Different name than one	Name:				
provided on registration)	Relationship:				
	Contact Number(s):				
Medical Considerations: (recent procedures, conditions, food allergies, medications effects, seizures, mental health, etc.)					
Behavioral Considerations: (does this person experience anxiety, high level of stress, or have any behaviours you feel we should be aware of? Are there any "triggers" – crowds, loud noise, etc. that should be avoided?)					
Support in challenging situations: (how can we best support the individual through a challenging situation?)					
Our class instructors are not able to assist with challenging behavior or complex medical needs and our Community Living Toronto staff support is limited. If this person has high behavioral or medical needs and requires a lower ratio of staffing (such as 1:1) we are able to provide this support as a fee for service option. Please contact us for further information.					
			15.		
Name of Person completing form:			Date		



PUBLICITY AND RELEASE FORM

I hereby authorize my name, likeness, image, voice, interview, and performance to be used for the education, public relations and fundraising purposes of the Association. I also authorize pictures (photographs/videotape/film) of myself to be taken for these purposes.

I understand that some examples of such uses are: the Annual Report, Connections Newsletter, brochures, slide shows, videotapes, displays, posters or billboards, releases to newspapers, Community Living Toronto's Corporate or Connect**ABILITY** web sites, DVD production and television stations. My consent is for such purposes as the Association may consider appropriate, and is not limited to these examples.

Name:	<u>.</u>	
Address:		
Phone:	Email:	
Location:		
Signature		Date
Signature of Witness		Date
In the event that an individual is und consent or lacks the ability to unders the parent or legal guardian or next	stand the issue of cor	
I hereby state that I am the parent or individual and give consent for this populicity as stated.		
Signature of Parent/Legal Guardian/Next of I	Kin	 Date
Signature of Witness		 Date