

COURSE DETAILS

What course do you wish to study?

February year 20 _____

July year 20 _____

Have you studied at The Makeup School before: Yes / No (circle one)

If so when:

Do you have any medical conditions or health issues? Yes / No (circle one)

Details if applicable:

Current Occupation:

Have you completed any other training or tertiary education? Yes / No (circle one)

Details if applicable:

How did you hear about The Makeup School?

What has led you to wanting to become a makeup artist?

Have you had any experience to date in the industry: Yes / No (circle one)

If so please describe in brief:

PLEASE NOTE: Payments must be received by The Makeup School ON OR BEFORE their due date. All Fees not received by the due date will incur a "late payment penalty fee", \$20.00 per day until payment is received, and student may be turned away from class. We recommend you deposit any funds 2 days prior to the due date to avoid any penalties. There will be no exceptions to this, so please make note of the due dates for your course payments.

ALL PHOTOS taken of student's work remain the property of The Makeup School, and may be used for promotional purposes.

DECLARATION: I confirm all the information in this application form is true and correct to the best of my knowledge and belief. I will inform The Makeup School Ltd if there are any changes to the detail of this application. I understand that the withholding of relevant information or the giving of false information may result in termination of enrolment.

Signed: _____

Date: / /

Printed name of legal parent or guardian _____

- * If under 18, this form must be completed and signed by your legal parent or guardian
- ** Please attach a copy of your current passport and/or driver's license
- *** Please make sure you double check and sign this form