

## 2019 Application for Student Card

- Applications will not be processed unless fully completed and accompanied by payment in full. Registration fee is **\$30.00+GST= \$31.50** per card. A cheque or money order made payable to BeautyCouncil must be attached or complete the credit card section below. A fee of \$20 will be charged for dishonoured or NSF cheques. **DO NOT MAIL CASH. FEES ARE NON-REFUNDABLE.**
- Applicant must be currently registered at a recognized school or institution. Student cards cannot be issued for applicants who have already completed their training.

Please complete all applicable \* mandatory fields

### APPLICANT INFORMATION – PRINT CLEARLY

|   |             |   |              |
|---|-------------|---|--------------|
| *Last Name:   |             | BeautyCouncil Membership #:                                   |              |
| *First Name and Middle Name:  |             | *Personal Email:  |              |
| *Home Address:  |             |   |              |
| *City:  |             | Province:   | Postal Code: |
| *Home Phone:  | Cell Phone: |   | Fax:         |
| Date of Birth:<br><i>mm/dd/yyyy</i>   |             | Gender: <input type="checkbox"/> M <input type="checkbox"/> F |              |
| *Program: <input type="checkbox"/> Hairdressing <input type="checkbox"/> Esthetics <input type="checkbox"/> Nail Technology <input type="checkbox"/> Barbering Other: _____ |             |   |              |

### STATEMENT OF APPLICATION

I hereby apply for a BeautyCouncil student card and verify that all information contained in this application is true.

\_\_\_\_\_ Signature of Applicant \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

### TO BE COMPLETED BY SCHOOL ADMINISTRATOR – PRINT CLEARLY

The applicant for a student card, whose name appears herein, has enrolled in the indicated program above.

\*Program Start Date: \_\_\_\_\_ \*Program End Date: \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

\_\_\_\_\_ Printed name of Proprietor \_\_\_\_\_ School Name

\_\_\_\_\_ Signature of Proprietor \_\_\_\_\_ Location of School (street & city)

### PAYMENT – Registration fee \$30.00 + GST = \$31.50

|                                      |                               |                         |               |
|--------------------------------------|-------------------------------|-------------------------|---------------|
| <input type="checkbox"/> Cheque      | _____ - _____ - _____         | _____ - _____           | _____         |
| <input type="checkbox"/> Money Order | Credit Card Number            | Expiry Date (mm/yy)     | Security Code |
| <input type="checkbox"/> VISA        | Name of Cardholder _____      |                         |               |
| <input type="checkbox"/> MasterCard  | Signature of Cardholder _____ |                         |               |
|                                      |                               | Date (mm/dd/yyyy) _____ |               |

### FOR OFFICE USE ONLY

|         |          |      |          |      |       |      |     |
|---------|----------|------|----------|------|-------|------|-----|
| \$31.50 | Other \$ | CASH | M. ORDER | CHEQ | DEBIT | VISA | M/C |
|---------|----------|------|----------|------|-------|------|-----|