

Clip Joint Education Introductory Courses 2016

Studen	ts Name:		••••••	• • • • • • • • • • • • • • • • • • • •
Addres	ss:	•••••	Pos	st Code
Teleph	one: ()		Mobile:	•••••
Email a	ddress:			•••••
Gende	r: □ Male	□ Female	Date of Birth:	
Emerg	ency Contact Person	•	Relationship:	•••••
Contac	t Number:			
School	Attending:			
Year Le	evel:	•••••	Vet Coordinator:	
	tudent is under 18 ye ademy for lunch and		guardian needs to give permission for	them to leave
I		g	give permission for	
to leav	e the Clip Joint Educ	cation premises fo	or lunch and break.	
Parent	or Guardian Signatu	re:	Contact number:	•••••
Please	indicate which cours	e you wish to enr	ol in:	
	1 Day Introduction	to <u>Makeup</u> – 20 th	April 2016 (including brush set!)	\$105.00
	2 Day Introduction	to <u>Hairdressing</u> C	ourse – 21 st & 22 nd April 2016	\$120.00
	Special offer! Both courses (including makeup brush set!) –			
	1 Day Makeup & 2	Day Hairdressing	– 20 th 21 st & 22 nd April 2016	\$200.00
	visit <u>CJE RTO-Code o</u> sign below:	of <u>Practice</u> to read	l Clip Joint Education students policy a	nd if you agree
Studen	t Name:	Sigr	nature: Date	:
Guardi	an Name:	Sign	ature: Date	:
Please	make your Cheque/I	Money Order pay	able to Clip Joint Academy of Hairdres	sing
If payir	ng by Credit Card ple	ease provide deta	nils: VISA / MASTERCA	ARD
Card N	lo:	•••••	Expiry Date:	
Card H	olders Name:	•••••	Signature:	
Please	forward this comple	ted form along w	ith payment to:	
PO Box	int Education x 3443 Mall ADELAIDE SA	5000		

Please make sure your application and payment is received by Clip Joint at least 8 working days before course commencement.

*please note – refunds will not be given if you withdraw less than 21 days before the commencement