Beauty EverLasting
PERMANENT COSMETICS & TRAINING ACADEMY

Beauty Everlasting Permanent Cosmetic Apprenticeship Program Enrollment Agreement

Name: _____ Date: _____

Cell Phone: _____ Email Address: _____

Address: _____
Street City State Zip

Emergency Contact:_____ Phone Number: _____

AGREEMENT ***Please complete each field.***

This agreement constitutes a legal & binding agreement between Beauty EverLasting &

_____ *(Student Name).*

1. *The cost for the apprenticeship Program is* ***$400.00/procedure.*** ***Initial***_____
2. *The payments are to be made the day of each procedure.* ***Initial***_____
3. *This apprenticeship includes a minimum of 5 of each of the following procedures*:
   Eyebrow, Lipliner/Full Lip Color & Eyeliner/Eyelash Enhancement. ***Initial***_____
4. *Each Student will is responsible for providing their own models*.
   It is at the Students discretion if they wish to charge their Models for their procedures.
   Keep in mind, these Models will be your clients. ***Initial***_____

PROGRAM SCHEDULE*

***If you have trouble finding your own models, Beauty EverLasting may be able to accommodate you. Please inquiry for availability.**

Model Name	Procedure	Appointment Date

5. It is understood that if I have any special needs required to complete the on-site portion of the class, I must notify *Beauty EverLasting* of these needs no later than two weeks in advance of the scheduled first day of class. Example: latex allergy, non-latex gloves required.

Initial_____

6. I understand that during class, the procedures will be conducting are invasive. It is my responsibility to acquire the Hepatitis B series of immunizations prior to my class date, or I agree to decline the Hepatitis B inoculation process in writing. In any case, I hold *Beauty EverLasting* and/or her associates, and ***Beauty Everlasting*** harmless for any accidental exposure to Bloodborne pathogens during the on-site class session.

Initial_____

7. Students agree to make themselves available to work with *Beauty EverLasting* on-site at specified dates & times agreed upon by both parties. Students are required to provide 48-hour notice of appointment cancellations, If student cancels a scheduled appointment on the day of the appointment a fee of $50.00 will be assessed.
Note: Beauty EverLasting understands there are times a cancellation may be warranted & holds the right to charge or waive the $50 fee. **Initial_____**

8. Cell phones are not allowed in procedure rooms. **Initial_____**

9. Each student is responsible for bringing a camera that he or she is familiar with, for taking before and after photographs of all their procedures. It is the responsibility of the student to take photographs of work performed for portfolio purposes. **Initial_____**

CONTRACT AGREEMENT

I have read and understood and agree with all aspects of this apprenticeship program agreement and had the opportunity to have all my questions regarding the program answered prior to enrolling with *Beauty EverLasting*.

Name:_____ (*please print*)

Student Signature: _____ Date: _____

Instructor/Owner: (*Brenda Wolk)* _____