IF YOU ARE INTERESTED IN PLACING YOUR NAME ON OUR WAITING LIST PLEASE FILL IN BELOW

NAME:	
ADDRESS:	
DATE OF BIRTH:	
CONTACT NO:	
EMAIL:	
PPS NO:	
TICK WHAT YOU HAVE COMPLETED IN SCHOOL:	**JUNIOR** ☐ **LEAVING** ☐ **NONE** ☐ **OTHER PLEASE SPECIFY:** _____ _____
NAME OF SCHOOL/S:	
DATE FINISH SCHOOL:	
WHAT COURSE/S YOU ARE INTERESTED IN:	**HAIR** ☐ **BEAUTY** ☐ **CATERING** ☐ **EMPLOYABILITY SKILLS** ☐
ANY OTHER INFORMATION YOU WOULD LIKE TO ADD:	**INTERESTS:** **HOBBIES:**