



**Cosmetology Registration Form**

Non-Refundable Registration Fee \$175.00  
(Must be paid at time of enrollment)

Please complete this registration form entirely and return during your enrollment appointment.

**Personal Information:**

Last Name	First Name	M.I.
Street Address		
City	State	Zip Code
Phone Number	Email	

**Emergency Contact**

First & Last Name	Phone Number	Relationship
Street Address		
City	State	Zip Code

**Desired Program**

Cosmetology 1500     Cosmetology 1800

**Desired Schedule**

Full-Time     Part-Time A     Part-Time B

**Desired Course Start Date**

1/6/2026     4/7/2026     7/7/2026     10/6/2026  
 2/3/2026     5/5/2026     8/4/2026     11/10/2026  
 3/10/2026     6/2/2026     9/1/2026

Briefly summarize your interests and desire to start a career in the cosmetology industry:

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