

Telephone: 01 4089769

Email: info@academy.ie

Website: www.academy.ie

Please print all details clearly. The name you print on this form will appear on your Diploma.
Both sides of this application form must be completed and signed in order for the application to be processed.

First Name:

Surname:

Address:

Telephone: M H W

Email: (please print clearly)

Date of Birth: Sex: M F Occupation: _____

Please say how you heard about us: _____

Have you any qualifications related to Beauty Therapy, Complementary Therapies, Anatomy & Physiology Y N

If YES name of qualification: _____ Year Received: _____

Awarding Body: _____ If ITEC Student No: _____

Courses / Workshops

Please state the course/workshop you are applying for: _____

Is it evening, weekend, daytime: _____

What venue: _____ Course start date: _____

Payments

Payments made to: Irish Academy of Massage & Beauty Training Ltd
Posted to: Waverley Business Park, Old Naas Road, D12

Please state amount enclosed: _____ (by Cheque, Postal Order, Bank Draft, Credit Card)

Credit Card Number: _____ Expiry Date: _____

Security Number: (last 3 digits on the back of card)

(Please note, credit card payments can also be made by phoning the office)

Declaration: I, the undersigned, confirm that the information given on this application is both truthful and correct. I understand that all deposits and fees paid are not refundable under any circumstance should I not take up my place or fail to complete the course. I have read and understood all sections on this application form including medical history.

Signature: _____ Date: _____

Please Turn Over For Medical History & Academy Terms and Conditions >>>

FOR OFFICE USE ONLY

Contra _____

Date _____ P.M. _____ C.F. _____ D.S. _____ Dep _____ Bal _____

P.P. _____

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Medical History

Please note it is important to inform us of any medical conditions or medication you may be receiving. It is also important that you keep us updated on any changes related to your medical/medication details throughout the programme. Please make sure you also read the terms and conditions below and sign at bottom of page.

Please fill in or tick where applicable.

Do you have any condition, medical or personal that may prevent you from giving or receiving a massage Y N
Comment: _____

Do you have any skin conditions or allergies Y N
Comment: _____

Any additional medical information: _____

Terms and Conditions

- All payments must be made on or before specified dates
- All courses are subject to numbers - fees will be refunded in the event of courses not taking place.
- 90% attendance is compulsory for all ITEC programmes, or students may not be entered for exams.
- The Academy reserves the right to exclude students from exams in the event of non payment of fees or levels of competency.
- You must inform the Academy of any change in name address/phone numbers, email address. Failure to do so could result in important information/correspondence not been received.
- Most correspondence will be conducted by email if you supply an email address.
- The Academy cannot be responsible for any items/valuables belonging to students while attending tutorials.
- The Academy reserves the right to change class times/dates/timetables.
- In the event of you not attending tutorials, information/handouts will be not be repeated/reissued.
- Students are responsible for all materials distributed to them by the Academy. The Academy cannot replace any materials lost or misplaced by students.
- Students under the influence of alcohol or any illegal substances should not attend tutorials.
- Students should make every effort to attend and be punctual for all tutorials.
- Students should maintain a high standard of hygiene while attending the programme and be suitably attired.
- Mobile phones must be turned off while attending tutorials.
- The Irish Academy of Massage and Beauty training bears the right to assignments submitted or images/video taken of/by students for a period of 25 years.
- Please note: Deposits and fees are not refundable under any circumstance.

Thank you for choosing to train with us.

Signature: _____ Date: _____