

Makeup Foundations—Workshops

DID YOU KNOW THAT YOU CAN COMPLETE THIS APPLICATION FORM ONLINE? VISIT: WWW.BLANCHEMACDONALD.COM/APPLY

PROGRAM INTEREST

I AM APPLYING FOR THE MAKEUP FOUNDATIONS—WORKSHOP(S) BEGINNING ON (LEAVE BLANK IF UNSURE):

PERSONAL INFORMATION

FIRST NAME

LAST NAME

PREFERRED NAME

DATE OF BIRTH (DAY / MONTH / YEAR)

GENDER, I IDENTIFY AS: FEMALE MALE CUSTOM:

THE PRONOUN(S) I USE: SHE / HER HE / HIM THEY / THEM CUSTOM:

MAILING ADDRESS

FULL ADDRESS

CITY

PROVINCE / STATE

POSTAL / ZIP CODE

COUNTRY

TELEPHONE

MOBILE

EMAIL

OCCUPATION

EMPLOYER

EMERGENCY CONTACT

FIRST NAME

LAST NAME

FULL ADDRESS

CITY

PROVINCE / STATE

POSTAL / ZIP CODE

COUNTRY

TELEPHONE

MOBILE

HEALTH

DO YOU HAVE ANY HEALTH ISSUES / CHALLENGES THAT THE SCHOOL SHOULD BE AWARE OF?

NO YES IF YES, PLEASE SPECIFY _____

ARE YOU TAKING ANY MEDICATIONS THAT THE SCHOOL SHOULD BE AWARE OF?

NO YES IF YES, PLEASE SPECIFY _____

ARE YOU COMFORTABLE PRACTICING MAKEUP-RELATED SERVICES ON OTHERS? YES NO

A FEW MORE QUESTIONS

WE'D LIKE TO KNOW MORE ABOUT YOU! PLEASE TELL US ABOUT YOURSELF AND WHAT YOU'RE HOPING TO LEARN FROM THIS / THESE WORKSHOP(S). A SHORT DESCRIPTION IS FINE:

HOW DID YOU HEAR ABOUT THIS / THESE WORKSHOP(S)?

HOW DID YOU HEAR ABOUT THE BLANCHE MACDONALD CENTRE?

REPUTATION ADVERTISING FACEBOOK INSTAGRAM INTERNET SEARCH
 MAGAZINE / NEWSPAPER EVENT REFERRAL OTHER. PLEASE SPECIFY _____

THIS APPLICATION HAS BEEN COMPLETED BY:NAME OF STUDENT / APPLICANT (PLEASE PRINT)

SIGNATURE OF STUDENT / APPLICANT

IF APPLICANT IS UNDER 19, NAME OF PARENT OR GUARDIAN (PLEASE PRINT)

SIGNATURE OF PARENT OR GUARDIAN

DATE

I CONSENT TO BLANCHE MACDONALD CENTRE SENDING ME COMMERCIAL ELECTRONIC MESSAGES INCLUDING NEWSLETTERS AND PROGRAM UPDATES BY EMAIL.

UPON RECEIPT OF A COMPLETED FORM, YOUR ADMISSIONS DIRECTOR WILL PROMPTLY REVIEW YOUR APPLICATION. ONCE YOU HAVE BEEN ACCEPTED INTO YOUR PROGRAM OF CHOICE, A NON-REFUNDABLE REGISTRATION FEE AND AN INITIAL TUITION PAYMENT ARE REQUIRED TO SECURE YOUR PLACE IN THE PROGRAM. FOR MORE INFORMATION, PLEASE CONNECT WITH YOUR ADMISSIONS DIRECTOR OR EMAIL INFO@BLANCHEMACDONALD.COM.

NOTE: COURSE OFFERINGS, SCHEDULES, TUITION FEES, FACILITIES AND FACULTY ARE SUBJECT TO CHANGE WITHOUT NOTICE. WE ALSO RESERVE THE RIGHT TO CANCEL OR POSTPONE CLASSES DUE TO INADEQUATE ENROLLMENT.

HOW TO SEND US YOUR APPLICATION—FOUR EASY OPTIONS

1. YOU CAN COMPLETE THIS FORM ONLINE AT: WWW.BLANCHEMACDONALD.COM/APPLY
2. IF THIS APPLICATION HAS BEEN EMAILED TO YOU AS A PDF, YOU CAN FILL IT OUT AS AN INTERACTIVE PDF FORM, AND EMAIL IT TO US AT: ADMISSIONS@BLANCHEMACDONALD.COM
3. YOU CAN SCAN THIS COMPLETED DOCUMENT AND EMAIL IT TO US AT: ADMISSIONS@BLANCHEMACDONALD.COM
4. YOU CAN SEND IN YOUR APPLICATION BY MAIL TO:
 BLANCHE MACDONALD CENTRE, UPTOWN CAMPUS
 100-555 W 12TH AVENUE
 VANCOUVER, BC, CANADA V5Z 3X7
 +1 604 685 0347