

# Enrollment Agreement

Chicago Permanent Cosmetics Center, LLC.  
3612 W. Lake Street  
Wilmette, IL 60091  
(773) 706-9531; [www.ChicagoPermanentCosmetics.com](http://www.ChicagoPermanentCosmetics.com)

Student Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C ) \_\_\_\_\_

## Specialty Class Application

Specialty Class \_\_\_\_\_ covering the following

topics: \_\_\_\_\_

to be held on the following dates: \_\_\_\_\_

unless changed by mutual consent.

This agreement is a legally binding instrument acknowledging that you have been given reasonable time to read and understand it, and that the refund policy and a description of the course are as posted on the website of Chicago Permanent Cosmetics Center, LLC.

Student acknowledges and is aware they will be attending the above Class only under the terms of this Agreement. Student acknowledges and is aware that the certification received upon the successful completion of this Class will only certify skills attained within the scope of this Class.

Student acknowledges that success is dependent on their application of practices learned in the course. The student additionally understands that minimum standards must be met to receive a certificate of completion. The school is in no way required to issue a certificate of completion unless the student performs satisfactorily in all aspects of the course. The school will make every effort to work diligently with each student to ensure successful completion of the course. Each student must complete work on live models, and attend their minimum scheduled classroom hours in addition to studying their manual. Unless changed by mutual consent, class hours are from 9:00 AM until approximately 6:00 PM , with 1 hour lunch break on each scheduled day .A total of \_\_\_\_\_ days of instruction will be provided. Students who are late for class will be charged a fee of \$50.00 per hour to make up time with the instructor at another time.

The student acknowledges that if any equipment belonging to the school is dropped, damaged, or otherwise misused in any way, the student will be required to replace the damaged equipment at the current cost of said equipment.

Student acknowledges that he/she is responsible for research of their local and state laws regarding licensing and operation of a permanent cosmetics business. The school is in no way responsible for legal advice regarding laws that govern your state.

Student also agrees that it is the instructor's sole discretion when student is ready to perform work on live models. While the school will make every effort to provide live models for students to work on, student acknowledges that no guarantees can possibly be made concerning said models.

Date: \_\_\_\_\_ Initials: \_\_\_\_\_

## Tuition Fees and Terms

**Student acknowledges that they have contacted their state or local health department (or governing**

**body) and understand the necessary requirements to determine which course is required:**

**5-day basic permanent makeup one-on-one course - Tuition and training materials: \$5,000.00**

**Processing fee, if paid by Credit Card: \$ 150.00**

To reserve a space in class, the student must remit a \$200 non-refundable deposit by Visa, Mastercard, Discover, Cash or Cashier's Check. This deposit will be deducted from tuition, which is due in full no later than ten (10) days prior to your class start date. If balance of tuition is not received within ten business days prior to the start date, the student forfeits their original \$200 deposit which held that class and will need to reschedule with a new deposit. All supplies for use during school will be provided for students. Student start-up kits and replacement supplies are available for purchase.

In the event the student fails to attend the scheduled class, no refunds will be given. If the student notifies the school as soon as possible that there is an emergency that prevents student from coming to scheduled class, the student will be offered the opportunity to attend one of the next two available class dates at no additional charge.

My signature below certifies that I have read, understand, and agree to my rights and responsibilities, and that the cancellation and refund policies have been clearly explained to me.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_