



Registration Form

Mequon Thiensville School of Esthetics Center for Advanced Esthetic Training

Please tell us about yourself

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

_____ Esthetician _____ Cosmetologist _____ LPN/RN _____ Other

Session Information

Private Tutoring

Please enter classes you would like to take privately:

Tuition

Amount Due: TBD on classes chosen

To reserve your space, a nonrefundable \$150 deposit is due two weeks prior to session date.

Remainder must be paid by credit card or cash on or before the private tutoring session.

Please, no checks on the day of class.

Check enclosed _____

Please charge my credit card:

_____ Visa _____ Master Card _____ Discover

Card #: _____ Exp date ____ / ____ Zip Code: _____

Name as shown on card: _____

Please complete form and email, fax or mail to:

email: spa@mtschoolorfesthetics.com

Fax: 262-242-3699

Mail: Mequon Thiensville School of Esthetics

11135 N. Wauwatosa Rd.

Mequon, WI 53097

Questions? Please call! Ask for Gail: **262-242-3505**