

True University Course Registration Form

Name: _____ Date: _____

Esthetics License Number: _____

Address: _____

Phone Number: _____

E-mail Address: _____ Class Dates: _____

- 4 Day Medical Esthetic Training; includes starter product (\$1695)
 Waxing (\$275) Chemical Peels (\$275) Lymphatic Drainage (\$495)

Credit Card Number: _____ Exp Date: _____

Deposit Amount (Half of the Course Cost): _____ Amount Due: _____

How did you hear about us? _____

Cancellation Policy:

- True University offers a full refund for cancellations made more than 30 days prior to the course date.
- After 30 days no refunds will be given.

Rescheduling:

- The student may reschedule the course date up to 14 days before the first day of class.
- After 14 days there is no option of rescheduling, your spot is secured.

Final Payment:

- The final payment must be made 7 days prior to the class start date.

I, _____ hereby authorize True Skin Care Center to charge the amount indicated above to secure my spot in an upcoming class. By signing below I acknowledge and accept the stipulations made above. I will abide by the cancellation policy set forth by True University.

Signature

Date

Send completed form to Terri Wojak:

Fax (312) 335-2074

Email terri@trueskincarecenter.com



TRUE UNIVERSITY