



FELLOWSHIP
FOR
BRITISH HAIRDRESSING
creative excellence

FELLOWSHIP APPLICATION

HOUSE PLUS MEMBERSHIP

This membership is designed for **SIX** people from one company regardless of how many salons/premises you have. These six people would be entitled to a complimentary ticket each to some of our events and they will be able to order extra tickets for other members of the team. We will communicate directly with all six members and you will jointly be responsible for sharing relevant information as you feel appropriate.



APPLICATION FOR HOUSE PLUS MEMBERSHIP

The following form can be completed electronically.
Once complete please email the PDF form directly to: **carol@fellowshiphair.com**.
We will confirm your membership fee once we have received your application.

The House of
wishes to become a member of The Fellowship for
British Hairdressing. We agree to abide by the rules and
regulations of The Fellowship for the time being in force,
or varied thereafter. Up to three people can apply.

Name:
Date:

Business address

Business Name	<input type="text"/>
Business Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Web Address	<input type="text"/>
Telephone	<input type="text"/>

Candidate 3

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Candidate 1

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Candidate 4

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Candidate 2

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Candidate 5

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

HOUSE PLUS MEMBERSHIP APPLICATION

Candidate 6

Full Name	<input type="text"/>
Job Title	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Home Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

How did you hear about us? (Tick where appropriate and add further details of where and when)

Recommendation _____

Social Media _____

Magazine _____

Trade Show _____

Please complete all sections. We use some of this information to promote your salon on our website. No private address details are published.

Press office address

Please tick here if same as business address

Press Office

Address

Email

Telephone

Website

First salon details

Please tick here if same as head office address

Salon Address

Salon Email

Salon Telephone

Give brief details of experience.

(Education, Fashion, Platform, Competition etc)

Please give details of any other Trade or Craft organisation affiliations, or Company affiliations

Salon Specialities (Please tick the services you offer)

<input type="checkbox"/> Dress Long Hair	<input type="checkbox"/> Extensions	<input type="checkbox"/> Men's
<input type="checkbox"/> Sunbeds	<input type="checkbox"/> Colouring	<input type="checkbox"/> Bridal
<input type="checkbox"/> Beauty Tmts	<input type="checkbox"/> Nails	<input type="checkbox"/> Perm
<input type="checkbox"/> Cutting	<input type="checkbox"/> Aromatherapy	<input type="checkbox"/> VIP Room
<input type="checkbox"/> Wigs	<input type="checkbox"/> Barbering	<input type="checkbox"/> Electrolysis
<input type="checkbox"/> Afro-Caribbean		

Other specialities:

Clientele and Policy

- Young/trendy Male No smoking All ages
 Children Crèche Wheelchair access

Price Guide

 (To the nearest £ please)

Cut/Finish	From: £ <input type="text"/>	To: £ <input type="text"/>
Perm	From: £ <input type="text"/>	To: £ <input type="text"/>
Colour	From: £ <input type="text"/>	To: £ <input type="text"/>
Highlights	From: £ <input type="text"/>	To: £ <input type="text"/>

HOUSE PLUS MEMBERSHIP APPLICATION

Payment Facilities Available

- Cash Cheque Visa Switch
 Amex Mastercard Delta Other

If other please specify

Customer Services available

- Model nights Tube/Rail Car Park
 Bus Beauty Room Tea/Coffee

Additional salon details (Please complete this section if you have more than one salon.)

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name

Salon Name

Salon Address

Salon Email

Salon Telephone

Salon Website

Contact Name