



FELLOWSHIP
FOR
BRITISH HAIRDRESSING
creative excellence

FELLOWSHIP APPLICATION

INTERNATIONAL MEMBERSHIP

Affiliate International Membership of the Fellowship shall be open to any hairdresser, or member of the hairdressing industry, that lives and works in any country that is not licensed by the Fellowship. The Affiliate International Member will receive all the benefits of being a Fellow but will have no voting rights within the Fellowship for British Hairdressing or any other licensed overseas Fellowship and is not eligible to stand for election to the Council or any other post within the Fellowship for British Hairdressing unless invited to at the Councils discretion. All applications shall be subject to the Council of the Fellowship for British Hairdressing, and if accepted shall become an Affiliate International Member of the Fellowship.



APPLICATION FOR INTERNATIONAL 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.

I wish to become an Affiliate International Member of The Fellowship for British Hairdressing. I agree to abide by the rules and regulations of The Fellowship for the time being in force, or as varied hereafter.

Name:

Date:

Business Name

Business Address

Web Address

Telephone

Email

Mobile No.

Number of Salons

Give brief details of experience.
(Education, Fashion, Platform, Competition etc)

Private Name

Private Address

Telephone

Years Hairdressing

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

How did you hear about us? (Tick where appropriate)

Recommendation *(Please state from who)*

Social Media *(Please state which one)*

Magazine *(Please state which magazine)*

Trade Show *(Please state which show)*

INTERNATIONAL MEMBERSHIP APPLICATION

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

First salon details

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Salon Website	<input type="text"/>

Press Office	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Email	<input type="text"/>
Telephone	<input type="text"/>
Website	<input type="text"/>

Accounts Office	<input type="text"/>
Contact Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Email	<input type="text"/>
Telephone	<input type="text"/>

Are you happy for the business information to be published to promote your salon?
Name <input type="text"/>
Dated <input type="text"/>
<input type="checkbox"/> I agree to The Fellowship contacting me by email with information on events and opportunities.
<input type="checkbox"/> I agree to The Fellowship publishing my salon information on their website and in their A-Z salon listings.

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

- | | | |
|--|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Young/trendy | <input type="checkbox"/> Male | <input type="checkbox"/> No smoking |
| <input type="checkbox"/> All ages | <input type="checkbox"/> Children | <input type="checkbox"/> Crèche |
| <input type="checkbox"/> Wheelchair access | | |

Price Guide (To the nearest £ please)

Cut/Finish From: £ To: £

Perm From: £ To: £

Colour From: £ To: £

Highlights From: £ To: £

Payment Facilities Available

- | | | | |
|-------------------------------|-------------------------------------|--------------------------------|---------------------------------|
| <input type="checkbox"/> Cash | <input type="checkbox"/> Cheque | <input type="checkbox"/> Visa | <input type="checkbox"/> Switch |
| <input type="checkbox"/> Amex | <input type="checkbox"/> Mastercard | <input type="checkbox"/> Delta | <input type="checkbox"/> Other |

If other please specify

Customer Services available

- | | | |
|---------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Model nights | <input type="checkbox"/> Tube/Rail | <input type="checkbox"/> Car Park |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Beauty Room | <input type="checkbox"/> Tea/Coffee |

INTERNATIONAL MEMBERSHIP APPLICATION

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

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>

Salon Name	<input type="text"/>
Salon Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Salon Email	<input type="text"/>
Salon Telephone	<input type="text"/>
Contact Name	<input type="text"/>