

Student Enrollment Application

I hereby apply for enrollment by mail to one of the classes offered at **Brenda's Academy of Professional Dog Grooming** in Moncton, NB.

I acknowledge the information presented on this application is accurate and truthful to the best of my ability and agree to all the course's terms and conditions, including related fees.

Please fill out this application and drop it or mail it to the school's address:

Brenda's Academy of Professional Dog Grooming
B-209 Collishaw Street
Moncton, NB E1C 7E6
Canada

If accepted into one of our classes, we will be in touch with instructions on the next step, including when and how to provide the non-refundable registration fee.

Which course dates do you wish to attend? (dd/mm/yyyy) _____

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Street Address: _____

City/Town/Village: _____

Province/Territory/State: _____

Postal Code/Zip Code: _____ Country: _____

What level of education have you completed? (select all that apply)

High School Technical School College University None

Are you 19+ year old? Yes No

If you are under 19 years old, please also have your guarantor fill out the Guarantee for Youth Student (found on page 2).

Applicant Student's Signature: _____ Date: _____

Guarantee for Youth Student (less than 19 yrs)

Any person not of age must have the following Guarantee filled out and agreed to by a parent, guardian, employer, or another responsible person 19 years or more of age.
Guarantee by the applicant's spouse is not acceptable.

As the Guarantor for this applicant, I hereby acknowledge the information presented on this application is accurate and truthful to the best of my ability and agree to all the course's terms & conditions. I waive notice of acceptance of this Guarantee

Guarantor, please fill out the following guarantee.

Guarantor's First Name: _____

Guarantor's Last Name: _____

Phone: _____ Email: _____

Occupation: _____

Relationship to Student: _____

Is your living address the same as the student's? Yes No

If your address is not the same as the student's, please enter your address below.

Street Address: _____

City/Town/Village: _____

Province/Territory/State: _____

Postal Code/Zip Code: _____ Country: _____

Guarantor's Signature: _____ Date: _____