

# 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 18+ year old? Yes  No

**If you are under 18 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 18 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 18 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: \_\_\_\_\_