INTERNATIONAL HAIRSTYLISTS SOCIETY

IHS

www.ihssociety.com.au

International Hairstylists Society

MEMBERSHIP APPLICATION

Name: .....

Postal Address: .....

..... Suburb: .....

State: ..... Postcode: .....

Salon/Training Provider: .....

Phone (Bus): ..... Phone (Private): .....

email: .....

I am a (please tick) ◯ Salon owner ◯ Senior Apprentice ◯ Student ◯ Other .....

.....

I heard about IHS through (please tick)

◯ Magazine ◯ Workplace ◯ Training Provider ◯ Website ◯ Other.....

METHOD OF PAYMENT (please tick)

☐ I have enclosed my cheque/money order for Apprentice Membership **$55.00**

☐ I have enclosed my cheque/money order for Ordinary Membership **$99.00**

☐ PLEASE debit my ☐ VISA ☐ MASTERCARD ☐ BANKCARD for ☐ Apprentice Membership **$55.00**
☐ Ordinary Membership **$99.00**

Card no: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Name on card: .....

3 Digit Security Code: _ _ _ Expiry Date: _ _/_ _ Signature: .....

SEND COMPLETED CARD AND PAYMENT TO: Sherelle Mondolo PO Box 204 Milperra NSW 2214

Membership Enquiries: Ph: 0416002567

OFFICE USE ONLY

Payment method (please circle): Cash Money Order Cheque Credit Card

Date paid: ..... Money order/cheque no (if applicable): .....

IHS receipt no: ..... Membership no: .....

Completed by: .....

For information on state events and contacts visit our website www.ihssociety.com.au