# **Mesh Integration Training Enquiry Form**

ProHair Extensions 155 Eastbank Street, Southport, PR8 1EE

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Your Details	
Full Name:	
Business Name (if applicable):	
Email Address:	
Phone Number:	
Experience & Certification	
Please tick any methods you are already certified in:  ■ NBR (Natural Beaded Rows)  ■ IBE (Invisible Beaded Extensions)  ■ LA Weave	

- Nano / Micro Rings
- Tape Extensions
- Other (please specify): \_\_\_\_\_

### How long have you been fitting extensions?

- Less than 1 year
- 1-3 years
- 3+ years

## **Current skill level:**

- Beginner
- Intermediate
- Advanced

# **Training Preferences**

### Are you booking as:

- An individual
- A salon (multiple trainees)

## Training Options (tick any that apply):

- One-to-one (in person)
- Small group (in person)

■ Online (live video training)	
■ Training at my salon (travel expenses apply)	
Preferred Date or Month:	
Any additional notes or questions:	
Additional Courses	
■ I would like to combine Mesh Integration and Me	shless Technique (additional cost)
Consent	
■ I agree to be contacted by ProHair regarding train be handled in accordance with the Privacy Policy.	ning courses and understand that my details will
Signature: Da	nte: