

Intercoiffure America/Canada "A" Member Application

NAME _____
SALON _____
STREET ADDRESS _____
CITY _____ STATE/PROV _____ ZIP OR POSTAL CODE _____
COUNTRY USA CANADA
SALON PHONE _____ SALON FAX _____
SALON WEBSITE _____
HOME PHONE _____ MOBILE PHONE _____
EMAIL _____

1. Number of years as a salon owner? _____
2. Are you a licensed hairdresser? _____
3. How many salons do you own? _____
4. Do you own 100% of your salon? _____
5. Salon is Corporation Partnership Unincorporated Sole Proprietorship
6. If your salon is a partnership, what percent do you own? _____
7. Number of licensed hairdressers employed? _____ Number of other employees? _____
8. Do you have booth rentals? Yes No

Application Fees

"A" Member- Salon owner: \$1,250 plus one time initiation fee of \$400

Qualifications: Salon owner, licensed cosmetologist, NO booth rental.

TO BE FILLED OUT BY SPONSOR:

One "A" member sponsor is required if sponsor is from applicant's state; otherwise two "A" member sponsors are required.

I, being an ICA "A" member in good standing, propose this person for membership in Intercoiffure America/Canada.

SPONSOR SIGNATURE _____ DATE _____
SPONSOR NAME _____
CITY _____ STATE/PROV _____

SPONSOR SIGNATURE _____ DATE _____
SPONSOR NAME _____
CITY _____ STATE/PROV _____

TO BE FILLED OUT BY APPLICANT

I have fully read and understand all the terms of this application.

APPLICANTS SIGNATURE _____ DATE _____

Mail application with payment to:

Intercoiffure America/Canada Attn: Maryanne McCormack, Membership Chair

Visible Changes 1303 Campbell Rd. Houston, Texas 77055

Telephone: 713-984-8800

maryanne@intercoiffure.us

Administrative Office: 800-442-3007

Intercoiffure America/Canada Specialty Member Application

If you have any questions, please contact our Administrative Office at 800-442-3007 or info@intercoiffure.com .

NAME _____
STREET ADDRESS _____
CITY _____ STATE/PROV _____ ZIP OR POSTAL CODE _____
COUNTRY USA CANADA
WEBSITE _____
PHONE _____ MOBILE PHONE _____
EMAIL _____

Are you a licensed Cosmetologist? Yes No

Check Appropriate Box:

- Platform Artist
- Celebrity Stylist
- Spa
- Make Up Artist
- Beauty School

Application Fees

Specialty Member: \$1,250 plus a one time initiation fee of \$400 (This amount will be refunded if your application is not accepted).

Referred By: _____

APPLICANTS SIGNATURE _____ DATE _____

Mail application with payment to:
Intercoiffure America/Canada Attn: Maryanne McCormack, Membership Chair
Visible Changes 1303 Campbell Rd. Houston, Texas 77055
Telephone: 713-984-8800
maryanne@intercoiffure.us
Administrative office: 800-442-3007

Intercoiffure America/Canada "B" Member Application

If you have any questions, please contact our Administrative Office at 800-442-3007 or info@intercoiffure.com.

REPRESENTATIVE/OWNER _____
STREET ADDRESS _____
CITY _____ STATE/PROV _____ ZIP OR POSTAL CODE _____
COUNTRY USA CANADA
MANUFACTURER _____
WEBSITE _____
PHONE _____ MOBILE PHONE _____
EMAIL _____

Application Fees

Sponsor "B" Member- \$2,000 (This amount will be refunded if your application is not accepted.)

Qualifications: Manufacturer of professional beauty products

APPLICANTS SIGNATURE _____ DATE _____

Mail application with payment to:
Intercoiffure America/Canada Attn: Maryanne McCormack, Membership Chair
Visible Changes 1303 Campbell Rd. Houston, Texas 77055
Telephone: 713-984-8800
maryanne@intercoiffure.us
Administrative office: 800-442-3007