



# BLUSH HAIR BEAUTIQUE RENTAL APPLICATION

## Your Contact Information

Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: \_\_\_\_\_ (H) (W) (C) E-mail: \_\_\_\_\_

## Professional Application & Experience

I am applying for (circle all that apply):    Chair Rental    Nail Technician    Massage Therapist

Other (please describe): \_\_\_\_\_

Do you have an LLC? (Y) (N)    Name of LLC: \_\_\_\_\_

Overall Experience: \_\_\_\_ years    Desired rental type:    Full-Time    Part Time    Limited

Desired days to work, and times during the day, as a guide for us: (M)orning, (A)fternoon, (E)vening

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
(M)(A)(E)	(M)(A)(E)	(M)(A)(E)	(M)(A)(E)	(M)(A)(E)	(M)(A)(E)

Professional Education & Training: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have other prior relevant experience? If so, please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Tell us about your goals in this career and how we can help you achieve them: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## References – Professional & Personal (minimum one of each)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

**Please submit application in person to Kim Grinwald in a sealed envelope, or via e-mail to [blushwatertown@gmail.com](mailto:blushwatertown@gmail.com). THANK YOU!!**