

APPLICATION AND AGREEMENT FOR PARTICIPATION IN CLASS

[Name of Student]

[Course Name/Date(s)]

In consideration for participating in the above-listed ***Aesthetics Network International®***, ***LLC*** training course, please **initial each line and sign at the bottom.**

____ I am attending the class solely for my own benefit and for the benefit of my clients.

____ I agree that I am physically able to work as a(n) _____
artist/technician.

A) I am not visually impaired.

B) I have the ability to see extremely close objects and perform finely detailed work.

____ I understand and agree that dedication and practice is required to become a safe and skilled Microblading technician. It is my responsibility to make time to practice this new skill. Microblading is considered a moderate to high skill level cosmetic procedure, and there are no guarantees that every student will be able to perform these skills safely and at the skill level required for course completion.

____ I understand and agree that, should ***Aesthetics Network International®***, ***LLC*** or any of its representatives, assess that it is not safe for me, or the model, to work on a live model in class, I will accept this decision without any repercussion or demand for refund of course fees. It is understood that every effort will be made by the training staff to remediate a student prior to dismissal of a student from the course.

____ I understand and agree that I am responsible for my own transportation, accommodation, and meals while attending training, with the exception of any “class functions” or snacks/meals provided by ***Aesthetics Network International®***, ***LLC*** which are outlined in the course description. I understand and agree that any delay or cancelation by a transportation carrier/provider (airline, bus, train, rental car agency, etc.) or lodging provider (hotel, air BnB, hostel, etc.) which impacts my ability to travel to or attend the course is my sole responsibility.

____ I understand and agree that **no refunds (partial or complete) will be issued** due to my inability or failure to attend all of, or a portion of, a course. I understand that once a payment is made, it is non-refundable. I have exercised caution to ensure I will be able to attend the course, prior to booking.

____ I understand and agree that tuition is **non-transferrable** to another student.

____ I understand and agree that it is my responsibility to bring my own model. If I am unable to locate a model, I understand that **Aesthetics Network International® , LLC** will locate one, on my behalf, for a \$100.00 USD fee which shall be paid by cash or check (U.S. residents only) during registration on the first day of the course.

____ I understand and agree that I am responsible for my own safety and assume liability for myself should I be injured during the training course. In consideration of receiving permission to obtain training, aids, supplies, equipment, materials; and being permitted to participate or assist others in aesthetic training courses conducted by **Aesthetics Network International® , LLC** the undersigned, himself, his heirs, his representative and assigns, hereby releases, remises and forever discharges and agrees to save and hold harmless and indemnify **Aesthetics Network International® , LLC** and its directors, instructors, all training agencies and related personnel from all liability claims, demands, causes of action and possible claims whatsoever, arising out of or related to any loss, damage or injury that may be sustained by persons or property, that may otherwise accrue to any of us or our respective heirs or representatives while in, or en route to or from an **Aesthetics Network International® , LLC** sponsored program/course, or resulting directly or indirectly from any training received or offered by **Aesthetics Network International® , LLC**, including but not limited to aesthetic training courses, sponsored and non-sponsored class meals, events, or outings; from any cause whatsoever including negligence of any of the foregoing releases. I understand and agree that if EITHER party brings legal action to enforce its rights under this agreement, the prevailing party will be entitled to recover its expenses (including reasonable attorneys' fees) incurred in connection with the action and any appeal.

____ I understand and agree that I will hold **Aesthetics Network International® , LLC** harmless for any liability resulting from my actions during training received or offered by **Aesthetics Network International® , LLC**, including but not limited to, aesthetic training courses, sponsored and non-sponsored class meals, events, or outings; that result in injury to myself, my model, class member, accompanied guests, or any other person or persons.

____ I hereby state, under penalty of perjury, that I am not a trainer, employee of a trainer, or attending the class on behalf of any trainer or organization representing training in the field of Permanent Cosmetics, Microblading, or Semi-Permanent Cosmetics.

____ I understand and agree that I will not train others in a paid or unpaid capacity, domestically or internationally, in the Microblading technique, for a period of 2 (two) years commencing from my course completion date.

____ I understand and agree that all course materials, to include Powerpoint® Slides, handouts, manuals, all photos, video; are copy written and are the intellectual property of **Aesthetics Network International® , LLC**.

____ I understand and agree that sharing, duplicating, selling, publishing on the internet, or in any publication, or in any manner conveying the course materials to another person or entity is strictly forbidden and punishable by domestic and international copyright law. Use of these materials in the training of another person or persons is strictly forbidden.

____ I agree not to record or photograph any part of the presentations in the course, including any materials unless specifically permitted by ***Aesthetics Network International® , LLC*** .

____ I understand and agree not to use any electronic devices in the Class unless granted permission by ***Aesthetics Network International® , LLC*** .

Name

Signature

Date

Witness Name

Signature

Date