

I AM: A first-time applicant
 Renewing my membership

I AM: A makeup artist who currently generates income from artistry jobs
 Currently enrolled in cosmetology/makeup artistry school

FIRST NAME: _____ LAST NAME: _____

SHIPPING ADDRESS: _____

MOBILE PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____

WEBSITE: _____

INSTAGRAM USERNAME: _____ BIRTHDATE: ____/____/____

WHICH OF THESE AREAS IS YOUR SPECIALTY WITH REGARD TO MAKEUP ARTISTRY?

PRIMARY SPECIALTY (CHECK ONE)	SECONDARY SPECIALTY (CHECK ONE)	OTHER (CHECK ALL THAT APPLY)	SPECIALTY
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Retail sales and events
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Studio (commercial or editorial photo shoots)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High-profile special events (celebrity award shows, fashion shows)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Everyday special events (weddings, prom)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Television/film
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special effects

IF YOU ARE A WORKING MAKEUP ARTIST, SUBMIT:

1. A copy of your driver's license or government issued photo ID
2. Two of the following:
 - a. Professional license (cosmetology)
 - b. Editorial page with name credit
 - c. Crew/call list on production company letterhead
 - d. Union card
 - e. Link to website
 - f. Business Card
 - g. Professional letter of reference

IF YOU ARE A MAKEUP ARTISTRY STUDENT, SUBMIT:

1. A copy of your driver's license or government issued photo ID
2. Proof of current enrollment at a licensed school of makeup artistry

EMAIL APPLICATION AND REQUESTED DOCUMENTS TO: customerservice@cravelashes.com