

EDINBURGH KILTMAKERS ACADEMY

19 – 21 St.Mary’s Street
Old Town
Edinburgh
EH1 1TA



APPLICATION FORM

Please complete and bring along to an Open Day or email the completed form to:

edinburghkiltmakersacademy@gmail.com

APPLICANT INFORMATION:

LAST NAME:	FIRST NAME:	TITLE:	D.O.B
STREET ADDRESS:		HOUSE NAME/NO:	
CITY:	REIGON:	POSTAL CODE:	
PHONE NO.	EMAIL ADDRESS:		

COURSE APPLIED FOR:

PLEASE LIST YOUR QUALIFICATIONS BELOW:

ANY RELEVANT EXPERIENCE HAND SEWING OR WITHIN THE KILTMaking TRADE?

PLEASE TELL US A LITTLE ABOUT YOURSELF AND WHY YOU WISH TO ENROL ON OUR KILTMaking COURSE:

WHERE DID YOU HEAR ABOUT US?

DISCLAIMER AND SIGNATURE:

I certify that my answers are true and complete to the best of my knowledge.

Signature:

Date: