



REGISTRATION	FORM			Year 2	2026				
Full Qualification	n Hair care			Full ti	me		Part ti	me	
Office use only:				Student	number:				
Registration fee receiv	ed	yes	no]					•
Copy of ID of student		yes	no						
Copy of highest qualifi	cation	yes	no						
Financial agreement co	ompleted	yes	no						
Indemnity signed		yes	no						
2 ID photos submitted		yes	no						
Copy ofID of debtor		yes	no						
SECTION 1: PER	RSONAL INFORM	1ATION	OF LEA	RNER (STUDENT	<u> </u>			
ID:			Title:	Mr		Ms		Other	
Married: YES/NO	Ma	aiden Nar	ne:			-		_	
Surname:									
First names:									
Nick name:			T-shirt si	ze:	S	m	I	other:	
Date of birth:			- Gender:						
Race: White	Black		- Colour		Indian		Other	_	
Home Language:			-		_				
SA Citizen:	yes	No	-						
Special learning ne	eds:	•		-					
Highest level quali	fication: (GRADE)							_	
Home Address:									•
Postal Address:									
Email:				Cell ph	one:				
				-					
SECTION 2: SAI	ON DETAILS OF	PART T	IME LEA	RNERS	S (STUDE	NTS)			
Name of salon:					-	-			
Name of Employe	:				Tel no:				
Address of salon:					_				
Salon email:									
Contract:	yes	no							
		•		-					
SECTION 3: NEX	XT OF KIN								
Surname:					Relation	:			
Full name:					_				
Home tel:	-				— Cell pho	ne:			
Email:					_ `				
Home address:					_				





Accommodation required:	No		Yes	Su	ıpply informati	on please
Breakage deposit payable e	qual to or	ne month:	s rental			
CECTION E. FINANCIAL	A CDEER AE	· A I T				
SECTION 5: FINANCIAL			at of food			
Information of person resp Original agreement to be so						
	ubilittea					
ID:		Title:	Mr -	M	s	Other
Surname:						
First names:						
Relation to student:						
Home Address:						
Postal Address:						
Employer:			Occupatio	n:		
Address of Employer:			-	···· —		
Email:			Cell phone	e:		
Home tel:			Work tel:			
Fax:			_			
Marital status:						
Are you applying for a student loa	an ?	yes		no		
2026 Farantonia						
2026 Fee structure FULL TIME STUDIES - NATIONA	VI AND INTE	DNATION A	AL OLIALIEI	CATION		
FOLL TIME STODIES - NATIONA	AL AIND INTE	KNATIONA	IL QUALIFIC	LATION		
Registration	R	6 000,	00			
Notes and ebooks	R	15 00,	00			
La Louve shirt	R	250,	00			
Full kit	R	12 000,	00	(KIT PRIC	E R12 000.00	
	R	19 750,	00	SUBJECTI	ED TO EXCHAN	GE RATE)
Class fees	R	70 000,	00			
Include knowledge ar	nd practical	modules				
exam fees						
GRAND TOTAL	R	89 750,	00			add C&

*Exclude City & Guilds international exam (R6 000-00) optional extra

*Exclude re assessments





PAYMENT OPTIONS PLEASE INITIAL AT YOUR CHOSEN PAYMENT OPTION:

Option 1 Once off payment national qualification (R 80 000.00)

*Excludes City & Guilds international exam (R6 000-00) optional extra

Option 2 1st payment of R19 750,00 and 10 monthly payments of R 7 000.00

*Excludes City & Guilds international exam (R6 000-00) optional extra

Regi	stration		R 6 000,00		
Text	book		R 1 500,00		
La Lo	ouve shirt		R 250,00		
Basi	c kit		R 2 500,00	Full kit available to par	t time learners
			R 10 250,00	price R12000	
Class	s fees	R	70 000,00		
TOT	AL	R	80 250,00		
(Part time kit	000 is also available to add on for each new m	odule	cost approx R9000	equest on top of the R2500) for ow	n account
				D3E 000 00 (VEAD ONE)	
Option 1	and (payment in Janu		_	R35 000,00 (YEAR ONE) R35 000,00 (YEAR TWO)	
	,		and monthly insta	lments of	
Option 2	R3 500.00 over 20				

BANK DETAILS:
Bank: NEDBANK
Branch Code: 155 345
Acc no: 1553 072 995

Account name: LA LOUVE PRIVATE HAIR ACCADEMY

REFERENCE: LEARNER NAME AND SURNAME MUST ALWAYS BE SUBMITTED ON PAYMENTS MADE





DECLARATION BY PERSON RESPONSIBLE FOR FEES:

- 1. I the undersigned, hereby certify that the learner indicated above, has my consent and financial support to be registered for the learning options indicated.
 - 2. I accept full responsibility for all costs with respect to fees for the learning programme that will be attended by the learner indicated herein.
 - 3. I confirm that all above information provided by me is true and correct
- 4. The learner will only be deemed as enrolled once the registration deposit has been deposited and proof thereof been received
- 5. I understand and accept that I will be held responsible for the outstanding amount of the programme fees if the learner or any authorised person cancels the learning programme. In case of a dispute both parties agree to the jurisdiction district of court at Pretoria North.
- 6. I undertake to pay all due fees immediately with cancellation of learning programme.
 - 7. I accept that La Louve Private Hair Academy reserves the right of admission
 - 8. I accept that La Louve Private Hair Academy reserves the right to upgrade or adapt learning material to the requirements of the Service Seta or other relevant bodies.
 - 9. I accept that a non-refundable registration deposit, with certified copies of the learners Identity document, Senior certificate and or Highest Qualification and all other relevant documents must accompany the completed registration form
 - 10. I understand that if the above payment arrangements are not met, the learner may not attend any classes or take part in any assessments until further arrangements have been made with management.

Signed at	on this	day of	20
Name of person responsible for account:			
			_
Signature:			





_	information supplied in this ith the rules and regulations		r Academy
·	ommit myself to comply with		, ricademy
Signed at	on this	day of	20_
Signature of learner:			
Signature of witness:			