

RUSK IN-SALON CLASS REQUEST FORM

SALON NAME:

ADDRESS:

SOURCE SALON #:

CITY/STATE:

PHONE:

SALON CONTACT:

DISTRIBUTER: UNITED NORTH

SALES CONSULTANT:

HOW LONG USING RUSK?

OF STYLISTS:

REQUEST CLASS TYPE: (CHECK ONLY ONE)

TOOLS FOR SELF EXPRESSIONS PK	_____ \$100.00/35PTS	DETAILING	_____ \$150/75PTS
THE LOOK CUTTING	_____ \$150.00/45 PTS	TEAM MEETNG	_____ \$175/45PTS
ANTICURL	_____ \$150.00/45pts	SALES MEETING	_____ \$125/60PTS
HANDS ON	_____ \$200.00/55pts	CLUSTER CLASS	_____ \$175/75PTS
OTHER	_____ \$ _____	STORE DAY	_____ \$200/75pts
THERMAL STR8 ASSIST	_____ \$175.00/75pts.	THERMAL STR8	_____ \$300/150PTS

DIRECTIONS/NOTES:

_____/_____
(REQUEST DATE) (DISTRIBUTOR EDUCATION MANAGER)

ALL CLASSES INCLUDE PRODUCT KNOWLEDGE. PLEASE DO NOT COMBINE CLASS FEES.

RUSK DESIGNER REIMBURSEMENT (FOR DESIGNER USE ONLY)

DATE OF CLASS:

NAME:

FEES:

ADDRESS:

MILEAGE:

CITY

MISC.

STATE

ZIP

TOTAL DUE \$

SS#

I CERTIFY THE ABOVE CLASS REIMBURSEMENT INFORMATION TO BE ACCURATE.

_____/_____
DATE DESIGNER SIGNATURE

COMPLETE FORM MUST BE RETURNED TO DISTRIBUTER WITHIN 10 DAYS OF COMPLETED CLASS.

NOTE: ALL MISCELLANEOUS EXPENSES MUST BE PREAPPROVED BY DISTRIBUTOR.