



COURSE APPLICATION

NAME: _____

ESTABLISHMENT EMPLOYED AT: _____

CONTACT NUMBER _____

E-MAIL ADDRESS _____

How long have you been in the bartending field? _____ **Months/Years**

APPLYING TO PARTICIPATE IN (circle one):

- **INTRODUCTION TO BARTENDING**
- **ADVANCED BARTENDING**

FORM OF PAYMENT (circle one):

- **CASH**
- **CREDIT CARD**
- **CHEQUE**

I AM HEREBY APPLYING TO PARTICIPATE IN THE COURSES PROVIDED BY BELIZE INSTITUTE OF MIXOLOGY. I AGREE TO ADHERE TO THE RULES AND REGULATIONS OF THE INSTRUCTORS. I AGREE THAT ALL TEST RESULTS ARE FINAL. I AM ALLOWING THE INFORMATION ON THIS FORM AS WELL AS ANY PHOTOGRAGHS OF MYSELF TAKEN DURING THE COURSE TO BE POSSIBLY DISTRIBUTED BY BELIZE INSTITUTE OF MIXOLOGY AS THEY SEE FIT.

SIGNED: _____

Luis Velasquez
Owner
Luis@BelizeMixology.com



www.BelizeMixology.com
Facebook.com/BelizeInstituteOfMixology
(501)662-2616