



Helen E Hair and Beauty
 Company Reg No. 3959446
 VAT No. 729961879
 Date: __/__/__

Helen É Academy Beauty Workshop

Final payment /Invoice

Due 4 weeks before workshop

College / Group Name:	
Address:	
Contact name and telephone number	
Date of workshop:	
Number of students the college anticipates: Minimum number of students required by Helen É is 20	
Cost per student is £16 for 2 hrs or £36 for 4hrs. Please state your choice.	
Deposit amount already paid:	
Balance to be paid on this invoice	£

HOW TO PAY

Payment options	Method selected (please tick)
Debit card: Please complete and FAX this booking form to 0121 559 3803 or SCAN to contact@helen-e.com You may also call 0121 559 3888 to pay via phone.	
Cheque: Payable to Helen É Cosmetics POST to The Academy at Helen É. Unit A1, Coombswood Business Park, Coombswood Way, Halesowen, West Midlands B628BH	
For BANK TRANSFER please call 0121 559 3888 to collect our bank details	

Card Type: Visa / MasterCard / Switch / Maestro / Solo / Electron (please circle)

Name of cardholder _____ Valid From __/__/__ Expiry date __/__/__

Issue No (Switch) __ Security Code: ___ (last 3 digits on signature strip) Card Number: ____/____/____/____

Authorised signature _____