



**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982
LOCAL GOVERNMENT ACT 2003**

**APPLICATION FOR REGISTRATION OF INDIVIDUALS FOR
ACUPUNCTURE, COSMETIC PIERCING, TATTOOING OR ELECTROLYSIS**

If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes. Use additional sheets if necessary.

I hereby make application under the above Act for Registration as a person who is authorised to carry on the business of Acupuncture/ Piercing/Tattooing/Electrolysis within the area of the local authority.

Section A – Applicant’s details

Name of applicant:	
Home address of applicant:	
Telephone number:	
Name of establishment:	
Telephone number:	
Do you intend to carry out any mobile business?	
Will this be the main function of your business?	
Type of registration required: (please tick)	Acupuncture <input type="checkbox"/> Cosmetic Piercing <input type="checkbox"/> Tattooing <input type="checkbox"/> Electrolysis <input type="checkbox"/>

Section B – Additional staff members to be registered

Names of any additional staff to be registered at the above premise:	
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Section C

I certify that, to the best of my knowledge and belief, the above particulars are correct.

I have enclosed the fee of £50

Signed:

Dated: