

COLLEGE KIT SECOND YEAR 2010/11

2ND YEAR BEAUTY KIT 2010 CAVA.Y210

077019 1 x Epilation Tweezer ,OC Point
077020 1 x Epilation Tweezer , H Blunt
440005 1 x Sterex S/S Needles Size .002 (25)
440001 1 x Sterex S/S Needles Size .003 (25)
081009 2 x Vinyl Gloves (100pk) - Small
574001/CR 4 x Hand Towel - Cream
208000 2 x Foil Blanket
077084 1 x Mask Removing Sponges (2)
078621 1 x Grapeseed Oil 500ml
257502 2 x Tape Measure
999009 1 x Disposable Masks (100)
002109 1 x Bath Gloves Pair
574004/MC 2 x Bath/Sauna Sheet - Mocha
574003/MC 2 x Bath Towel -Mocha
224001 1 x Body Brush
677023 1 x Toweling Mitts Black
098001 2 x 4" Bowl

TOTAL COST OF KIT INCLUSIVE OF VAT & HOME DELIVERY - €109.00

Beauty Express, Unit 7 Evanton Drive, Thornliebank
Industrial Estate, Thornliebank, Glasgow G46 8HL
College Department T: +44 (0)141 620 2807 F: +44 (0)141
620 2811 E: colleges@beautyexpress.co.uk

Student Kit Order Form



Send to: Beauty Express College Department, Unit 7, Evanton Drive Thornliebank Glasgow G46 8HL

Email : student-link@beautyexpress.co.uk

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|--|
| College Name: |
| CAVAN INSTITUTE - 0001636 |
| Student Name (USE BLOCK LETTERS) |
| |
| Home Telephone No. (including STD code) |
| |
| Mobile Telephone No. |
| |
| Email Address: |
| |

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|--------------------------|
| Delivery Address: |
| |
| EIRE |
| Deliver To: |
| HOME DELIVERY |

| Code | Description | Qty | Price* | Total |
|------------------|------------------------|-----|----------------|-------|
| CAVA.BK10 | BEAUTY KIT 2010 | | €565.00 | |

| | | |
|--|---------------------------|------------------|
| | SUB TOTAL | € |
| ADMIN FEE-Applicable on orders placed after | 1ST SEPTEMBER 2010 | ADMIN FEE |
| | | € 5.00 |
| | TOTAL | € |

RECEIPT OF PAYMENT WILL BE CONFIRMED TO YOUR COLLEGE
DELIVERY CAN TAKE UP TO 21 DAYS - PLEASE ENSURE YOU HAVE READ OUR STEP BY STEP GUIDE ON REVERSE

How to Pay For Your Kit...

PAYING BY CREDIT/DEBIT CARD

| | |
|--|-----------------------------------|
| Card Type | Mastercard / Visa/ Switch/Maestro |
| Card No. | |
| Ex. Date | Security no: |
| Valid From | Issue No.(switch only) |
| NAME & ADDRESS OF CARDHOLDER: | |
| | |

PAYING BY CHEQUE/POSTAL ORDER

I enclose cheque made payable to Beauty Express:

| |
|---|
| € |
|---|

| |
|--|
| CHEQUE SIGNATORY (PLEASE PRINT) |
| |

PLEASE WRITE THE ACCOUNT NUMBER
BELOW ON THE BACK OF YOUR CHEQUE

| |
|----------------|
| 0001636 |
|----------------|

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

| | | | |
|----------------------------|----------------|--|--|
| Date Funds Received | Banking | | |
| | Order | | |
| | R/Book | | |