



**WIRRAL BOROUGH COUNCIL
LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (as amended)
SECTIONS 14 AND 15**

**REGISTRATION OF PERSONS TO CARRY OUT THE PRACTICE OF
ACUPUNCTURE, TATTOOING, SEMI-PERMANENT SKIN COLOURING, COSMETIC
PIERCING OR ELECTROLYSIS**

I (full name of applicant)

Home address

.....

Telephone number **Mobile telephone number**

Email address

Hereby apply to be registered for carrying out the practice of (please tick all that apply)

- | | | | |
|--------------------------------------|--|---------------------------------------|----------|
| ACUPUNCTURE <input type="checkbox"/> | TATTOOING <input type="checkbox"/> | ELECTROLYSIS <input type="checkbox"/> | COSMETIC |
| PIERCING <input type="checkbox"/> | SEMI-PERMANENT SKIN COLOURING <input type="checkbox"/> | | |

At (address where applicant will carry out the practice)

.....

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- Have you ever been convicted of an offence under section 16 of the Local Government (Miscellaneous Provisions) Act 1982? Yes No
- Have you been treated for any infectious disease in the last 12 months or ever suffered from jaundice? Yes No

If **Yes** please state the illness, give the date and duration of the illness and where treatment was received.

Illness **Date** **Duration**

Treatment received at

I declare that my answers to the above questions are correct.

Signed Date

when you have fully completed this application form, please return it, together with the registration fee made payable to Wirral Borough Council (Card payments Telephone payments can be made on 0151 606 2430)

TO: Environmental Services, Environmental Health Division, PO BOX 290, Brighton Street, Wallasey, Wirral, CH27 9FQ