



NAME		SURNAME	
ID NUMBER		DATE OF BIRTH	
CONTACT NUMBERS			
EMAIL ADDRESS			
NATIONALITY			
PHYSICAL ADDRESS		POSTAL ADDRESS	
SEX		HEIGHT	
WAIST		COLLAR (MALES)	
SUIT/DRESS		HIPS	
CHEST/BUST		SHOE SIZE	
HAIR COLOUR		COLOUR OF EYES	
OXYGEN SCHOOL		OTHER	
LISTING FEE	R 200.00 PER YEAR	R100.00 PER UPDATE	
TYPE OF PAYMENT	CHEQUE	DEPOSIT	
	Oxygen Models Academy CC	Name of Account	Oxygen Models Academy
		Name of Institution	ABSA
		Account number	405 593 44 22
		Branch code	632005
		Type of account	Cheque

This form and 5 different photos must be delivered to your Oxygen School. Cheques and deposit slips must be attached to the form.

By completing this form I give Oxygen Models permission to use my photograph on their website as well as to market myself to agents. I also fully understand that by joining the Oxygen Models Agency there is no guarantee of job placement or work.

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SIGNATURE

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PARENT/GUARDIAN (IF UNDER 18 YRS)

DATE .....

NAME .....