



The Fashion Network Agency Membership Application

Date: _____

Name: _____

Telephone Number: _____

Other contact telephone number: _____

Email address: _____

Website: _____

Facebook: _____

Instagram: _____

Twitter: _____

Other: _____

Please answer the questions below.

1. What is your profession(s)? Check all that apply.

- Fashion Designer
- Sketch Artist
- Pattern Maker
- Seamstress
- Model
- Hair Stylist
- Make-up Artist
- Nail Artist
- Accessory Maker
- Personal Stylist

- Photographer
- Boutique Owner
- Advertiser/Marketer/Promotor
- Merchandiser
- Venue Owner
- Light/Sound/Stage Crew
- Entertainment producer
- Caterer/Decorator
- Vendor (Name of Business: _____)
- Student (Name of School: _____)

2. **Are you interested in receiving notification about fashion jobs, opportunities, programs and events produced by Keli Khristine?** Yes or No
3. **Are you seeking to increase your customer base and sales?** Yes or No
4. **Are you interested in networking and collaborating with other fashion and entertainment professionals?** Yes or No
5. **Are you interested in teaching a class or becoming a student in your profession or another fashion or entertainment industry?** Yes or No
6. **Are you interested in being a vendor?** Yes or No
7. **What are you current needs?** _____
8. **What are your wants?** _____
9. **What are your fees and terms/conditions? (submit attachments if needed)** _____

10. **What are you working hours?** _____
11. **Are you flexible with your working hours?** Yes or No

Notes:

- Keli Khristine will review you membership application and respond by email or regular mail.
- Contract Labor Agreements are required before any services are rendered.

Forms can be...

Emailed to: keliikhristine@gmail.com

Faxed to: (314) 296-3622

Or

Mailed to: P. O. Box 771552, St. Louis, MO 63177