



ARMSTRONG McCALL
PROFESSIONAL BEAUTY SUPPLY

Registration Confirmation Form

Note: Membership to this website is Private and currently restricted to Armstrong McCall franchise owners and their designated employees. Once you have registered on the website and submitted a completed and owner signed copy of this form to the website administrator, your application will be subjected to a screening procedure. If your request is authorized, you will receive notification via e-mail of your access to the website. All fields are required, including contact phone number, valid e-mail address and store owner signature.

Date: _____

Distributor Name: _____ Store #: _____

User Information

First Name

Last Name

Title/Position

Contact Phone

User Login ID
must match registration ID

E-mail
must match registration e-mail

Store Owner Approval

Name

Signature

Please fax completed form to **1-866-539-7641**