



NOTTINGHAMSHIRE COUNTY COUNCIL ACT 1985 (PART IV)

**PRACTITIONERS (AUTHORISED USER) REGISTRATION FORM
FOR THE USE OF INTENSE LIGHT SYSTEMS AND/OR LASER EQUIPMENT (PRESCRIBED
EQUIPMENT) ONLY**

To be fully completed by the applicant in all cases
PLEASE COMPLETE IN BLACK INK AND IN BLOCK CAPITALS

1.	Name of Premises	
2	Address of Premises	
	Post Code	
	Telephone Number	
3	Name of Practitioner (Authorised User) to be registered	
4	Maiden /Former Name(s)	
5	Date Of Birth /Place of birth	
6	Home address of Practitioner (Authorised User)	
	Post Code	
	Telephone Number	
7	Have you been previously licensed to use Laser/Intense Light equipment (Prescribed Equipment) with any other Local Authority? If Yes, please provide details of the Local Authority (s)	
8	Please attach a passport size photograph of yourself	

All Practitioners are required to complete the treatment and qualifications table below. You must attach a photocopy of the certificate or training record to this registration form as proof that you have received the qualification.

List of Treatments		Qualification – Please attach certificates.
Vascular Treatments		
Port wine stains		
Telangectasia		
Thread veins		
Leg veins		
Pigmented Treatments		
Tattoo removal		
Pigmented lesions		
Lentigenes		
Photo-aging		
Hair Removal		
Body and facial hair		
Hair management for hirsutism		
Ablative Treatment		
Removal of epidermal layers		
Acne scarring		
Wart removal		
Benign lesions		
Photo-Rejuvenation		
Photo-ageing		
Rosacea		
Large pores		
Mottled pigmentation		
Any other Treatment (Please list)		

DECLARATION:

I have provided my certificates and photographs with this application form. I declare that the information that I have provided is correct to the best of my knowledge and understand that I will be guilty of an offence if I knowingly provide false information.

Signature

Date

All information provided will be treated in compliance with the Data Protection Act 1998. The Council may wish to share the information you supply with other departments within the Council. If you do not wish the Council to use the information you have supplied in this way please tick the box.