

Wyoming Board of Cosmetology
2515 Warren Avenue Suite 302, Cheyenne WY 82002
Phone (307) 777-3534 Fax (307) 777-3681

Salon Renewal Application

Online renewals available at <http://cosmetology.wy.gov>

Renewal Fee: \$75.00, due by December 31st
(After December 31st late fees apply)

SALON LICENSE NUMBER _____

NAME OF SALON _____ OWNERS NAME _____

ADDRESS OF SALON _____ CITY _____ STATE _____ ZIP _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

SALON PHONE NUMBER _____ EMAIL ADDRESS _____

Since your last renewal or within the past two (2) years:

- 1. Has any state(s) rejected your application or disciplined, restricted, revoked or suspended your license? Yes _____ No _____
- 2. Have you ever voluntarily surrendered your license in order to avoid disciplinary action by any regulatory agency? Yes _____ No _____
- 3. Have you ever been convicted of any felony? Yes _____ No _____
- 4. Do you now use, or within the last five (5) years have you used alcoholic beverages habitually to excess? Yes _____ No _____
- 5. Do you now use, or within the last five (5) years have you used hallucinogenics, barbiturates, narcotics or any controlled substance habitually to excess? Yes _____ No _____

Signature of Licensee _____

For Board Use Only:

Date Processed: _____
Amount Processed: _____
Authorization Code: _____

The following information will be shredded after processed.

A processing fee of \$4.00 will be charged for credit card use.

Indicate card using: | Card Number _____ CVVC Code _____ (on back of card)
[] VISA | Expiration Date _____ Phone # (307) _____
[] MASTERCARD | Name on Card _____
[] DISCOVER | Billing Address _____

Signature _____