

ARKANSAS DEPARTMENT OF HEALTH
 BODY ART SECTION
 4815 WEST MARKHAM, SLOT #8
 LITTLE ROCK, AR 72205
 (501) 682-2168

Guest Artist Temporary Demonstration License

INSTRUCTIONS: This form shall be used to request a Body Art Temporary Demonstration License. The form must be completed and returned to the Section’s office, along with the required items listed below **SEVEN (7)** days prior to the event.

NOTE: THERE WILL NOT BE ANY MONEY OR FORMS ACCEPTED AT THE EVENT. IF YOU HAVE NOT REGISTERED 7 DAYS BEFORE THE EVENT YOU WILL NOT BE ALLOWED TO PERFORM.

Required items:

1. A completed Guest Artist – Temporary Demonstration License form (this form).
2. A check or money order for the \$50.00
3. Copy of any current licenses held from other states
4. Proof of attendance – Blood Borne Pathogen Course (current calendar year)
5. List of pigments to be used – MUST BE on the accepted list provided by the AR Department of Health

A Guest Artist may be issued a temporary demonstration license to appear as guest artist no more than one (1) time every three (3) months.

Applicant Information:

First Name		Middle Name		Last Name	
Address		Apt #	City		State
Phone Number		Email Address			
SSN	Date of Birth		License Number		State Issued

Date(s)	Name and Location of Licensed Establishment for Guest Artist appearance
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Pigment(s) to be used:

By signing this form, I certify that the information provided is correct to the best of my knowledge.

Printed Name	Signature	Date
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