OHIO STATE COSMETOLOGY AND BARBER BOARD
To protect and support the public through regulation and education, while promoting the integrity of the cosmetology and barbering industries.
1929 GATEWAY CIRCLE GROVE CITY, OHIO 43123
PHONE: (614) 466-3834 WWW.COS.OHIO.GOV

# Temporary Event Salon License - Location Change Form

**This form is required to be submitted to the Board prior to each new event. Form must be emailed to: OSBC.Temp.Events@cos.state.oh.us**

## CONTACT INFORMATION

Name: _____

Email: _____

Temporary Event Salon License Number:_____

## Temporary Event Information

**Event Type:**

On Location Bridal Prep
Bridal Show
On Location Spa Event
Homebound (Private Residence)
Other - Must Specify
Charity Event

**Temporary Event Salon License must be available at each event.**

⇩ **Indicate Event Type Below**

| Event Date | Street Address | City | Zip Code | Event Type | Begin/End Time |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**Name:** ______________________________________________

**Temporary Event Salon License Number:** _______________________ **(Required)**

**Event Type:**

On Location Bridal Prep
Bridal Show
On Location Spa Event
Homebound (Private Residence)
Other - Must Specify
Charity Event

**Indicate Event Type Below**

| Event Date | Street Address | City | Zip Code | Event Type | Begin/End Time |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |