

GUILD

AGME. Public Exams - Music & Speech. Ph: 03 9822 3111 - Mail: Po Box 8051 Kooyong Vic 3144 Email: admin@guildmusic.edu.au - Web: guildmusic.edu.au

EXAMINATIONS IN THEORY - MUSIC & SPEECH

THEORY ENTRY FORM – MUSIC & SPEECH

Year:	TOD -THEORY ON DEMAND	YEAR. SPEECH – Third Friday in June. Dis available from February to December. or more details & separate entry form.		
State:	Examination centre:			
Teacher OR School. (Use	e own name if self entry).			
Title Name				
Address:				
No & Street.	Suburb.		State.	Postcode.
Contact details:	2			
Mobile :	Home / Studio	o:		
Email :				
Number of entries in tota	l:	Total of fees for this entry: \$		
Signature:		Date://		

GENERAL INSTRUCTIONS.

PAYMENTS: It is the teacher's responsibility to make the total payment of entry fees to the

GUILD. Payment can be made by EFT - Credit Card – Cheque / Money order.

Individual student's or parent's payments are not acceptable.

LATE ENTRIES: Late entries may incur a late fee.

RECIEPTS: In accordance with normal business practice no receipts will be issued unless

requested in writing.

REFUNDS: No refunds on examination entries are possible.

Refer to the Contact - Handbook for all details of fees and procedures.

Contact the Guild office for assistance if required.

PLEASE PRINT CLEARLY.

Name details will be printed on certificates the way it is entered onto this entry form.

Abbreviations for identifying examination levels etc. Preliminary = PREL Grade? = G?

Check Speech syllabus & Contact - Handbook for higher level indications such as Proficiency & Diplomas.

N	G:	G		DDD
No.	Given name	Surname	Theory level	FEE.
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
7				\$
8				\$
9				\$
10				\$
11				\$
12				\$
13				\$
14				\$
15				\$
16				\$
17				\$
18				\$
19				\$
20				\$
	Continue to next p 20 students are bei		Total	\$

Continued from previous page. Teacher Name:

No.	Given name	Surname	Theory level	FEE.
21	Given name	Sui name	Theory level	\$
22				\$
23				\$
24				\$
25				\$
26				\$
27				\$
28				\$
29				\$
30				\$
31				\$
32				\$
33				\$
34				\$
35				\$
36				\$
37				\$
38				\$
39				\$
40				\$
	7	Total both pages	\$	ı

NOTES & COMMENTS to the GUILD office.

Teacher Name:			
Fill in the SUPERVISOR are being organized loca		hese examinations	
Also state the VENUE w		ns are being held.	
Supervisors Details.			
Name:			
Address:			 ••••
Phone:	Mobile:		
Email:			
Venue details.			
Address:			