



Australian
Music
Examinations
Board (WA)

rockschool®

EXAMINATION ENROLMENT FORM

THIS FORM MAY BE PHOTOCOPIED FOR CONVENIENCE ABN: 37-882-817-280

TEACHER CODE

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Postal Address:
AMEB (WA)
The University of
Western Australia
M421, 35 Stirling Hwy,
Crawley WA 6009
Tel: (08) 6488 3059
amebwa@uwa.edu.au
ameb.uwa.edu.au

ENROLLER DETAILS: (ALL CORRESPONDENCE WILL BE SENT TO THE ADDRESS BELOW)

Title: _____ Name: _____

Address: _____

_____ Postcode: _____

Phone: (Home) _____ (Mobile) _____

Email: _____

Is this a change of address since your last entry?

Please indicate if enrolment submitted by:

School Private Teacher Self Entry (Name of Teacher: _____)

ANY OTHER INFORMATION:

Drum exams please specify:

- Acoustic or electric
- Right or left handed

Guitar exams please specify:

- Acoustic or electric

Selected week:

Week 23 (27 May – 2 Jun 2019)

Week 47 (11 – 17 Nov 2019)

CANDIDATES:

PLEASE REFER TO THE CURRENT EXAMINATION TIMETABLE FOR FEES, CHARGES AND ENROLMENT CONDITIONS.

Date of Birth	Sex (M/F)	Surname	Given Names (in order)	Telephone	Subject Code	Grade	Instrument	Exam Type ¹ (g, p, b)	Centre ² (M, R)	Fee \$	Res	S	C

¹ Exam Type: g = grade, p = performance, b = band.

² Centre: M = Metropolitan, R = Rockingham.

DECLARATION:

I certify that I understand and accept that this examination enrolment is subject to AMEB examining procedures and enrolment conditions as outlined in the Schedule and Fees document and current Manual of Syllabuses. I also consent to the disclosure of personal information relating to both candidate and enroller, being relayed to AMEB Ltd and Rockscool Ltd.

Signature: _____

(THIS ENROLMENT WILL NOT BE ACCEPTED UNLESS SIGNED)

Date: _____

OFFICE USE ONLY

Receipt No.

PLEASE LEAVE BLANK IF EMAILING. PHONE YOUR CREDIT CARD DETAILS THROUGH TO AMEB OFFICE.

TOTAL FEE ENCLOSED: \$ _____

CREDIT CARD INFORMATION:

FORM OF PAYMENT:

- Cash Cheque* Credit card

Card type: VISA Mastercard Card No: _____ Expiry: _____ Amount: \$ _____

Name: _____ Signature: _____

Address: _____ Postcode: _____

***Please make cheque payable to UWA**