**EXAMINATION ENROLMENT FORM**

**TOTAL AMOUNT DUE:** $ _______________________

**FORM OF PAYMENT:**
- [ ] Cash
- [ ] Cheque*
- [ ] Credit card**

* Please make cheque payable to UWA
** IF YOU WISH TO PAY BY CREDIT CARD, PLEASE CONTACT THE WA STATE OFFICE ON 6488 3059

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

<table>
<thead>
<tr>
<th>Title:</th>
<th>Name:</th>
<th>Address:</th>
<th>Postcode:</th>
<th>Phone: (Home)</th>
<th>(Mobile)</th>
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**Is this a change of address since your last entry?**

- [ ] Yes
- [ ] No

**Please indicate if enrolment submitted by:**
- School
- Private Teacher
- Self Entry (Name of Teacher: ____________________________)

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**Australian Music Examinations Board (WA)**

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**DECLARATION:**

I accept all AMEB policies relating to the conduct of examinations as outlined in the current Manuals of Syllabuses. I also accept all AMEB(WA) policies as outlined on the State website and current AMEB Examination Timetable. I also consent to the disclosure of personal information relating to both candidate and enroller, being relayed to AMEB Ltd and Rockschool Ltd.

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**EXAMINATION ENROLMENT FORM**

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

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Sex (M/F)</th>
<th>Surname</th>
<th>Given Names (in order)</th>
<th>Telephone</th>
<th>Subject Code</th>
<th>Grade</th>
<th>Instrument</th>
<th>Exam Type¹</th>
<th>Selected Week Number</th>
<th>Fee $</th>
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¹ Exam Type: g = grade; p = performance; b = band.

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**SECURITY CAMERAS:**

Please be aware that AMEB (WA) uses closed circuit television (CCTV) (video only) in its examination and warm-up rooms on the Claremont Campus in order to protect candidates, examiners and supervisors, and to comply with industry standards and expectations concerning child protection legislation.

By entering the examination/warm-up room, the candidate agrees to being recorded.

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**Signature:** ________________________________ **Date:** ________________________________

**(THIS ENROLMENT WILL NOT BE ACCEPTED UNLESS SIGNED)**