



FOUNDATION OF
MUSIC EDUCATION

Examination Entry Form

(Please print neatly and return it to your teacher for collating)

Candidate's Given Names		
Candidate's Surname		
Date of Birth		
Teacher's Name		Email:
Teachers Address		
Examination Centre Requested		
Graduation Level (please tick)	<input type="checkbox"/> Bronze Level - \$45 <input type="checkbox"/> Silver Level - \$50 <input type="checkbox"/> Gold Level - \$55	Total Fee \$____.____ <i>Method of payment</i> Credit Card <input type="checkbox"/>
Credit Card Details	-----	
Card Holders Name		Exp. Date: ____/____
Card Holders Signature		
Conditions of Examination Assessment		
<p>1. In the event that a child is ill or unable to attend a set examination time, a fee of \$15.00 will be charged for rescheduling to a later period. There are no refunds for examination fees paid.</p> <p>2. If you believe that there may have been an error in the assessment of a student, you may lodge any complaint in writing for consideration.</p> <p>I, (Parent or Guardian's name) have read and understand the Conditions of Examination Assessment.</p> <p>..... (Parent or Guardian's signature)</p>		

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