



Enrolment Form

6/236 Elgar Road, Box Hill South, 3128, Vic, Australia.
Please Email all your queries to: greenwoodmus@gmail.com
Phone (Mob): 0405 555 024 (Tel): 9808 7123

PLEASE PRINT WHEN FILLING IN THIS FORM

Surname	Male / Female (please circle)
First Name	If you require a book <u>as well as</u> the CD ROM (Please indicate here by a tick).
Date of Birth	
Name of supervisor, parent, guardian or music teacher (Circle if relevant)	
Contact phone number	()

Student's home postal address including area postcode:

Contact phone number:

()

Email address:

Music Theory Grade level (if known):

Your music goals:

Preferred Method of Payment (circle) Postal Order/Bank Cheque/
Personal Cheque/Direct Debit.

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