

Deferment Form



Australian Guild of Music
Education Inc.

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www.guildmusic.edu.au

www.guild@hotkey.net.au

Date: _____

Student ID: If known _____

Student Name: _____

Address: _____

Suburb: _____

Postal Code: _____

Country: _____

Email Address: _____

Website: _____

Home Phone: _____

Business phone: _____

Mobile phone: _____

Fax Number: _____

Fee Help: (Yes/No) _____

Date of Birth: _____

Australian Citizen: (Yes/No) _____

Visa Dates: _____

Next of Kin: _____

Contact Number: _____

Course: _____

Full or Part Time: _____

Major Instrument: _____

Level: (if any) _____

Second Instrument: _____

Level: (if any) _____

Theory Level: _____

Request a Deferment in my course: (State reasons and intended date of resuming studies)

There are four semesters - First Semester: 10th January, Second Semester: 1st March, Third Semester: 1st June, Fourth Semester: 1st September. All fees are divided into four payments in advance, prior to or at the beginning of each semester.

I accept the place I have been offered and acknowledge that I have received and read the AGMED handbook and I am familiar with the requirements. I have also received a Course Syllabus, and guild guide pamphlets. I note that there are no refunds once fees are paid. (Except under exceptional circumstances).

Signed: _____