

AXMusic Examination Entry Form

Please complete the following form **printing clearly**. Information supplied below will only be used by AXMusic for exam purposes.

Please send this completed application form along with a cheque made payable to AXMusic to
AXMusic, PO Box 71, Aberdare, CF44 4AY.

1. Candidate's Details <small>(Please ensure correct spelling)</small>	
Full Name: (as it will appear on certificate)	
Date of Birth: (DD/MM/YY)	Gender: (M/F)
Full Address:	
Postcode:	
Email Address:	
Home Tel No:	Mobile Tel No:
Special Needs Candidates: Please include a supporting letter explaining your requirements.	

2. Exam Details: For details of examination periods please go to www.axmusic.co.uk			
Grade:	Instrument:	Exam Location:	Exam Period: A B C
Teacher's Name:		Type of Exam: CPL or PL	
Please state any dates that are impossible for you to attend:			
AXMusic will endeavour to accommodate candidate's needs where possible but it is not guaranteed we can avoid these dates.			

3. Check List & Fees:	
Entry Check List: <small>(Please tick).</small>	
Music Compositions 1 and 2.	<input type="checkbox"/> If entering Play Live no need to tick this Box
Compositions are authentic & composed by candidate	<input type="checkbox"/> If entering 'Play Live' no need to tick this box
Appropriate fees are included.	<input type="checkbox"/>
Fee enclosed: £	Cheque no:
<small>(For current exam prices refer to our website, www.axmusic.co.uk) (Please write candidate's name on back of cheque and make payable to AXMusic)</small>	
Parent/Candidate's Signature :	Date : _ / _ / _ _ _ _
Teacher's Signature :	Date : _ / _ / _ _ _ _
<small>(If the candidate is under age of 18 this entry form must be signed by a parent/guardian/teacher)</small>	