



August 2014

Archbishops' Certificate in Public Worship

Initial Application Form

PLEASE READ THE 'GUIDELINES & SYLLABUS FOR THE ARCHBISHOPS' CERTIFICATE IN PUBLIC WORSHIP' (available from <<http://www.guildofchurchmusicians.org.au/>>) BEFORE COMPLETING THIS FORM

Personal Details	
Title: _____ First Name: _____ Family Name: _____	
Correspondence Address: _____ _____ _____	Church Details: _____ _____ _____
Home phone: _____	Contact person: _____
Mobile: _____	Phone: _____
Fax: _____	Mobile: _____
E-mail: _____	Fax: _____
Denomination: _____	E-mail: _____

I am a Guild member (membership number: _____)

OR

I have applied for membership of the Guild of Church Musicians and am awaiting my membership number.

Additional Information

Technical standard:

AMEB (grade, instrument & year of examination): _____

Trinity College (grade, instrument & year of examination): _____

Other organisation/equivalent study/experience: _____

I have the following experience in Church Music:

Please tick ONE OPTION:

Please enrol me for the entire ACertPW now. I enclose AUS\$535 as payment.

Please enrol me only in the parts indicated on the enclosed ACertPW Parts A-D form.

(NB: the Parts A-D form is not required if you enrol for the entire Award up-front.)

Please list any other relevant information about yourself or conditions of your examinations (disabled access or assistance required, known dates of unavailability, etc.):

Please make your cheque payable to **The Guild of Church Musicians** and forward to:

The Examinations Secretary
Guild of Church Musicians
PO Box 420
Gordon NSW 2072
AUSTRALIA

Declaration:

I agree to abide by the decision of the examiners and accept the Guild of Church Musicians' conditions of enrolment.

Signed: _____

Date: _____