



ST. CECILIA EXAMINATIONS NZ

DIPLOMA ENTRY FORM 2010

Return this fully completed entry form to SCSM PO Box 5937, Lambton Quay Wellington 6145 NZ

Examination Centre _____ Teacher _____

Examination Session: _____ 2010

Your Name: (as you would like to see it on the certificate & all documentation)

Your Full Postal Address: _____

_____ P/Code: _____

Telephone No: () _____ Fax No: () _____

Mobile No: _____

Email Address: _____

Diploma Details: Please ✓

	Fees NZ\$
<input type="checkbox"/> Associate Diploma SCSM (Performance)*.....	\$475.00
<input type="checkbox"/> Associate Diploma in Theory & Composition.....	\$475.00
<input type="checkbox"/> Associate Diploma in Musicology.....	\$475.00
<input type="checkbox"/> Associate Dip.SCSM (Teaching)*.....	\$475.00
<input type="checkbox"/> Diploma in Composition.....	\$495.00
<input type="checkbox"/> Diploma in Musicology.....	\$495.00
<input type="checkbox"/> Dip.SCSM (Performance)*.....	\$525.00
<input type="checkbox"/> Dip.SCSM (Teaching)*.....	\$525.00
<input type="checkbox"/> Diploma in Church Music.....	\$525.00
<input type="checkbox"/> Fellowship Diploma*	\$750.00

* Instrument: _____

Duet Diplomas please add 10%

Fee of \$_____ is attached to this entry form.

By signing this Diploma Entry Form, I acknowledge reading and abiding by the examination regulations and requirements and understand and accept that the examiners' decision is final.

Signed: _____ Date: _____