

JSB Membership Application

Personal Information

Name:

Postal Address:.....Postcode;.....

Tel.Email:

Date of Birth:

Musical Education

Instrument:

Last AMEB Exam (or equivalent) passed and date.....

OR No of years playing:

Other music experience:

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Current Music Teacher

Name:

Postal Address:Postcode:

Telephone:

Signature: (parent to sign if applicant under the age of 18)

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Date:

Parent name:

Please send to PO Box 160, Rosanna 3084