

## THE MUSIC TEACHERS' ASSOCIATION OF NEW SOUTH WALES

ABN: 33 000 033 447

## MEMBERSHIP APPLICATION

Return completed form, copies of qualifications and other supporting evidence to <a href="mailto:info@mtansw.org.au">info@mtansw.org.au</a> or 45 Chippen Street, Chippendale NSW 2008

Application Category (tick the category under which your application should be considered)
Accredited Member Student Friend
Fitle Mr, Mrs etcSurnameGiven Names
Address
Suburb Post Code
Phone Mobile
Email
Name the subjects you are qualified to teach as reflected in the qualifications listed overleaf (Piano, Theory, Violin etc)
Subject(s) for which you are seeking Accreditation:
If you teach children (anyone under the age of 18 years, please supply your WWCC and DOB below
PLEASE PROVIDE YOUR WORKING WITH CHILDREN CHECK NO.
DATE OF BIRTH:
The MTA is the only organisation in NSW vested with the right to accredit private studio teachers. This role was previously administered by the Sydney Conservatorium of Music as approved by State Cabinet. Please state how you became aware of the Music Teachers' Association of NSW
Declaration  I, the undersigned, wish to become a member of the Music Teachers' Association of NSW Ltd as indicated above, and hereby agree subject to the acceptance of this application, to be bound by the Constitution and By-Laws of the Association. I hereby remit my application fee for membership as set out below. I understand that if my application is unsuccessful that this application fee (less a \$20 administration charge) will be refunded to me, upon request. I also understand that if an application for Accredited memberships unsuccessful, then Member status will be automatically awarded. A pro-rata refund may be applicable to this application.
Applicant's Signature Date
Membership Type Metropolitan Sydney, Newcastle and Illawarra Branches Country, interstate and international Student (studying tertiary degree or diploma full-time) Friend  Payment Method: - Cheque - Money Order - VISA - Mastercard - EFT
EFT – Westpac Mortdale BSB 032 167 Account No. 363926
CC No:
Expiry Date: / Amount: \$  Cardholder Name:
Signature:

## **QUALIFICATIONS:**

	For diplomas or other professional qualifications gained, state whether performer (P) or teacher (T) and include the relevant institution, in the space provided. Please specify subjects for which qualifications have been gained.
	1. <b>PHOTOCOPIES</b> of <b>all</b> qualifications listed must be attached to this form.
	2. <b>TRANSCRIPTS</b> are also required as evidence of studies in teaching.
	3. In the case of overseas qualifications, a certified translation must be provided.
	V: Is your CV attached? (Contemporary applicants) – Yes / No  eaching Qualifications (Degrees, Diplomas etc and date of such awards)
Evidence of Teaching in your category This should include students' results, evidence of pedagogy, professional development courses and/or other supporting evidence This may include evidence as a teacher of contemporary, jazz and popular music (List attachments)	