

Entry form for Rock & Pop exams

Completing this form

Please read carefully the notes alongside each section.

Please use BLOCK CAPITALS throughout, except for the signature.

Space is given for details of 12 candidates. If you have more than 12 candidates, additional forms must be used. Each must be signed by the person making the entry and the total fees on each form must be written in the space provided. All completed forms should be stapled together. You should make **one** payment to cover the entries on all the forms. **Cheques should be made payable to Trinity College London**.

Send completed entry forms to your Local Area Representative. Do not send entries to Trinity's London office.

Do not fax entries under any circumstances.

A Appl	icant's	details				
	,	,	, ,		ation and news about our program receive such information.*	mes,
Name						
Address						
					Postcode	
Tel.	(day)	Area code		No		
	(evening)	Area code		No		
email						

Notes

Applicant's details

The person named in this section accepts responsibility for entering the candidates named on the form.

The named person may be a teacher, a parent/guardian of a younger candidate or an adult candidate. Where relevant, this person can act on behalf of a school or company.

All communications will be sent to this person and will be sent to the address given here. Trinity College London cannot accept responsibility if the information given is inaccurate.

Please give telephone numbers at which the named person can normally be contacted.

Data protection

Please refer candidates to our website www.trinityrock.com for information about how Trinity will use their personal data.

B About the exam

Exam dates are shown on a separate sheet enclosed with this entry form and are also available at www.trinityrock.com

Centre name _______Year_______

Give dates or times when you or your candidates are ${f not}$ available:

About the exam

Full details of centres and dates for Rock & Pop exams are available at www.trinityrock.com

Please indicate your **preferred** centre for exams.

Give the month and year of the exam session for which you are entering.

Please write here any dates or times during the relevant session at which candidates are **not** available for exam because of prior commitments.

Representatives will do their best to meet requests to avoid specific dates, but this cannot be guaranteed.

^{*} We respect your privacy. Information is held in accordance with Trinity's data protection policy, available at www.trinityrock.com

		Notes
C Name of teacher or school		Notes
Complete this section if you want the nar	ne of the teacher or school on certificates.	Name of teacher or school Include here the name of the teacher, if
Teacher		required on certificates. Please show the teacher's qualifications in
Teacher's qualifications	the order required on certificates. (Up to 5 characters – letters (upper and lower case	
School	as appropriate), spaces and punctuation, including parentheses – can be included). Include the name of the candidate's schoo if required on the certificate.	
		in required on the certificate.
D Total fees and applicant's	signature	Total fees and your signature Write here the total fees covered by all ent
Payment of	enclosed for total fees.	forms being submitted. Cheques should be made payable to Trinity College London.
I agree to abide by the regulations of Tri	nity College London available at www.trinityrock.com	The person named in Section A must sign and date each form. This constitutes an
Signature	Date	agreement to abide by Trinity College London's exam regulations.
Special needs (e.g. partially sighted) Requirement (e.g. large-print sight reading) Braille certificate required? Yes / No Please include a Special Needs Provision the nature of the special needs in as much www.trinityrock.com or from your Local candidates must be accompanied by a co		Candidates with special needs Please indicate the requirements of candidates with special needs. Please be aware that no concession can be made in the marking of the exam. If the candidate is under 16 years of age the Special Needs Provision form will have to be signed by a parent/guardian of the candidate or a duly authorised agent. The Special Needs Provision form and proof of the special needs must accompany the entry. Receipt If a receipt is required, please fill in your name on the receipt at the bottom of this page. Receipts will be issued only if your name is filled in and a stamped-addressed envelope is sent with the entries.
Grade/level codes	Subject codes	
IN Initial 01 Grade 1 02 Grade 2 03 Grade 3 04 Grade 4 05 Grade 5 06 Grade 6 07 Grade 7 08 Grade 8	RPB Rock & Pop Bass RPD Rock & Pop Drums RPG Rock & Pop Guitar RPK Rock & Pop Keyboards RPV Rock & Pop Vocals	
RECEIPT A receipt will be issued only Name	if your name is filled in here and a stamped addressed (envelope is enclosed with your entry.
For Trinity College London use only		

Signed __

Received the sum of _____

Date __

F Candidates' details						
For each candidate, please give the full name as it should appear on the certificate. Underline the FAMILY NAME clearly below the line.						
Candidate 1 Please tick if this is the candidate's first entry						
Full name						
Date of birth Male / Female Special needs? (Please tick, then give details in Section E)						
Subject Grade Grade Fee type						
For Drums only. Tick if left-handed set-up is required						
Candidate 2 Please tick if this is the candidate's first entry						
Full name						
Date of birth						
For Drums only. Tick if left-handed set-up is required						
roi bruins only. Tick it lett-flatided set-up is required						
Candidate 3 Please tick if this is the candidate's first entry						
Full name						
Date of birth DDDMMYY Male / Female Special needs? (Please tick, then give details in Section E)						
Subject Subject Grade _ Fee type						
For Drums only. Tick if left-handed set-up is required						
Candidate 4 Please tick if this is the candidate's first entry						
Full name L L L L L L L L L L L L L L L L L L L						
Date of birth						
For Drums only. Tick if left-handed set-up is required						
roi bruins only. Tick it lett-flatided set-up is required						
Candidate 5 Please tick if this is the candidate's first entry						
Full name _						
Date of birth						
D D M M Y Y Mor F (Please tick, then give details in Section E) Subject Subject						
For Drums only. Tick if left-handed set-up is required						
Tot Brains only. Held held tanded set up is required						
Candidate 6 Please tick if this is the candidate's first entry						
Full name						
Date of birth						
Subject Grade Fee type Fee type						
For drum kit only. Tick if left-handed set-up is required L						
If you are entering more than six candidates, please tick here and continue on the back page. Add up the total fees for this form and insert the amount here:						
(Remember to include the entries on the back page.) TOTAL FEES						

Notes

Candidates' details

Write in the instrument or subject as it appears in the syllabus.

Write in the grade for each candidate – see table on opposite page.

Write in the subject code for each candidate – see table on opposite page.

Show the fee for each candidate, and indicate the type of fee:

- F Full fee
- H Half-fee re-entry (this must be accompanied by a valid re-entry permit)
- L (see late-entry procedure at www.trinityrock.com)

Write in each candidate's date of birth and gender. We are required to collect this information for various education and government bodies. This information is not communicated to examiners or to any third party.

Tick the box if the candidate has any special needs requirements. Further details must be given in **Section E**.

Fees

Exam fees are printed on a separate sheet enclosed with this entry form. If the fee sheet is missing, another copy may be obtained from your Local Area Representative or from www.trinityrock.com

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Candidate 7	Please tick if this is the candidate's first entry $lacksquare$
Full name L L L L L L L L L L L L L L L L L L L	
Date of birth D D M M Y Y	Male / Female Special needs? Special needs? (Please tick, then give details in Section E)
Subject L	Grade Fee Fee type
For Drums only. Tick if left-handed set-up	o is required
Candidate 8	Please tick if this is the candidate's first entry
Date of birth D D M M Y Y	Male / Female ☐ Special needs? ☐ ☐ (Please tick, then give details in Section E)
	Subject Grade Fee type
For Drums only. Tick if left-handed set-up	o is required
Candidate 9	Please tick if this is the candidate's first entry
Full name L L L L L L L L L L L L L L L L L L L	
Date of birth D D M M Y Y	Male / Female Special needs? (Please tick, then give details in Section E)
Subject	Subject Grade Fee type
For Drums only. Tick if left-handed set-up	o is required
Candidate 10	Please tick if this is the candidate's first entry
D D M M Y Y	Male / Female Special needs? (Please tick, then give details in Section E) Subject
Subject	Grade Fee type Fee type
For Drums only. Tick if left-handed set-up	o is required
Candidate 11	Please tick if this is the candidate's first entry
Full name	
Date of birth D D M M Y Y	Male / Female ☐ Special needs? ☐ (Please tick, then give details in Section E)
Subject L	Subject Grade Fee type Fee type
For Drums only. Tick if left-handed set-up	o is required
Candidate 12	Please tick if this is the candidate's first entry
Full name	
Date of birth D D M M Y Y	Male / Female Special needs? (Please tick, then give details in Section E)
Subject	Subject Grade Fee type

Notes

Candidates' details

Write in the instrument or subject as it appears in the syllabus.

Write in the grade for each candidate – see table on page 2.

Write in the subject code for each candidate – see table on page 2.

Show the fee for each candidate, and indicate the type of fee:

- F Full fee
- H Half-fee re-entry (this must be accompanied by a valid re-entry permit)
- L (see late-entry procedure at www.trinityrock.com)

Write in each candidate's date of birth and gender. We are required to collect this information for various education and government bodies. This information is not communicated to examiners or to any third party.

Tick the box if the candidate has any special needs requirements. Further details must be given in **Section E**.

If you are entering more than 12 candidates, please use additional entry forms. These should be stapled to the first form and sent together to your Local Area Representative.

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