

ASPIRING & ENTRANCE THEORY EXAM APPLICATION FORM 2025

Applications Close Monday 16 June 2025 at 4pm

Dr / Mr / Mrs / Ms / Miss NAME: _____

ADDRESS: _____

POSTCODE: _____

PHONE: (MOBILE) _____ (HOME) _____

VCA MEMBERSHIP No.: _____

EMAIL _____

☐ I have attended all aspiring lectures and have attached by lecture attendance record

☐ I require assistance because of a learning disability or disability

PLEASE ENCLOSE APPLICATION FEE OF \$90

(Non-Refundable)

METHOD OF PAYMENT:
(Please tick)

CASH

CHEQUE

CREDIT CARD

CREDIT CARD DETAILS:

Mastercard ☐

VISA ☐

Expiry date : _____

Credit Card Number

CW : _____

Signature: _____

Amount Paid: \$ _____

SIGNED: _____

DATE: _____