VICTORIA COLLEGE EXAMS

Entry form for examination via Video Link

Your full name:

Which instrument will you be playing?

Which Grade?

Name of teacher:

Include any degrees, diplomas, etc. If you have no teacher enter "self-tuition"

Your postal address: *(This will be used for postal correspondence including despatch of certificates)*

Postcode:

EMail:

For contact, invoicing, Skype/Zoom connection, etc. VCM Privacy Policy can be viewed at www.vcmexams.co.uk/pdfs/Privacy-policy.pdf

Tel. No.

Approximate date you will be ready for examination:
month:_____ year: 20_____

I apply for examination subject to the College Regulations which are available on the College website http://www.vcmexams.co.uk/generalregulations.php

I consent to the above information being held indefinitely on records under VCM's Privacy Policy compliant with the General Data Protection Regulation (GDPR) and I understand that I can request it be deleted at any time.

Please invoice me via PayPal using the email address shown above.

Signed.....***Date***.....

This form, when completed, should be emailed to

entries@vcmexams.com

The examiner will contact you and a arrange a mutually convenient date and time for the examination

This form can be photocopied or downloaded from www.vcmexams.com (forms and fees tab)