



SYDNEY FILM SCHOOL

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RTO Provider Number 91074
CRICOS Provider Number 02631G
VET Provider Number 7147

Digital Filmmaking Distinction Course Application Form

Please complete all sections of this form printing clearly using **BLOCK LETTERS** & **tick boxes** where appropriate.

Personal details

First name Family name Middle names

Date of birth Gender Male Female

Australian citizen New Zealand citizen Citizen of another country – please specify

Contact Details

Phone (day) Phone (night) Mobile

Email address

Current residential address *You must provide a residential address*

Number & street name

Suburb/Town State Postcode

Postal address

Leave this section blank if your postal address is the same as your residential address

PO Box /

Number & street name

Suburb/Town State Postcode

Phone (day) Phone (night) Mobile

Emergency contact

First name Family name Relationship

Phone (day) Phone (night) Mobile

Declaration

I am interested in film, screen and digital media and/or the creative arts and want to gain an introduction to the processes of filmmaking.
I understand that acceptance of this application is conditional on payment of the course fee of \$475 in full prior to the commencement of the course.

Applicant's signature:

Date:

Please mail the Enrolment Application to:

Sydney Film School (Distinction Course)
PO Box 602
Alexandria 2015

Or Email the form to:

admissions@sydneyfilmschool.com