



GAA

Gemmological Association of Australia

Course Application
South Australian Division

Name:
Surname Given Name Middle Name

Business Name:

Address:
Number Street

Suburb State Postcode

Telephone - Home: **Business:**

Email:

Register Number (if known): **State Division:**

Are you known to the GAA under any other name? NO YES - Details:

Have you undertaken any of the courses listed below? NO YES - Details:

Are you a member of the GAA? YES NO Course START/FINISH date:

Full name as required to be inscribed on the Certificate:

PLEASE TICK ONLY ONE COURSE THAT YOU ARE REGISTERING FOR NOW!

Tick	Course Name	Course Code	Price	Tick	Course Name	Course Code	Price
<input type="checkbox"/>	Diploma in Gemmology*1st year		NM	<input type="checkbox"/>	Synthetic and Gemmology Update		NM
<input type="checkbox"/>	Diploma in Gemmology*2nd year		NM	<input type="checkbox"/>	Introduction to Gems and Gemmology		NM
<input type="checkbox"/>	Diploma in Diamond Technology (including by correspondence)		NM	<input type="checkbox"/>	Pearl Threading		NM
<input type="checkbox"/>	Practical Diamond Grading		NM	<input type="checkbox"/>	Advanced Pearls		NM
<input type="checkbox"/>	Advanced Diamond Grading		NM	<input type="checkbox"/>	Administration, Management and Human Resources		NM
<input type="checkbox"/>	Retail Diamond Consultant		NM				

*Also available in Correspondence/Flexible Mode

**Short Courses not available in all States

NM = Non member

Method of Payment

Credit Card Cheque Cash

Amount enclosed is \$ _____ Make cheques payable to " Gemmological Association of Australia S.A. Division Inc.

Or Please debit my Mastercard Visa

Card No: Expiry Date: / /

CCV No. _____ (the last 3 digits of the number printed in the signature panel)

Card Holders Name: _____

Signature: _____

Electronic Funds Transfer

Account Name: Gemmological Association of Australia S.A. Division Inc

BSB: 610-101 **Account Number:** 070319480

Please send receipt by fax or email, with transaction details

I acknowledge that the GAA will not issue to me any certificate/statement/
diploma until all membership fees and/or course payments are made in full.

Signature: _____ **Date:** ____/____/____

Course passed: Yes or No (circle)
Certificate issued: Yes or No (circle)
Date issued: ____/____/____
Issued by: _____

(Administration use only)

New South Wales Division

24 Wentworth Ave
Darlinghurst NSW 2010

Tel: (02) 9264 5078

Fax: (02) 9283 5629

email: nsw@gem.org.au

Queensland Division

PO Box 144
Grange QLD 4051

Tel: (07) 3357 1088

Fax: (07) 3861 0499

email: qld@gem.org.au

South Australian Division

GPO Box 191
Adelaide SA 5001

Tel: (08) 8227 1377

Fax: (08) 8227 1377

email: sa@gem.org.au

Tasmanian Division

Philip Smith Centre
2 Edward St
Glebe Tas 7000

Tel: (03) 6261 4233

email: tas@gem.org.au

Victorian Division

PO Box 14008
Melbourne VIC 8001

Tel: (03) 9326 6160

Fax: (03) 9326 6150

email: vic@gem.org.au

Western Australian Division

PO Box 431
Claremont WA 6910

Tel: (08) 9385 5489

Fax: (08) 9286 4986

email: wa@gem.org.au