



GAA

Gemmological Association of Australia

Short 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

SA Short Courses On Offer

Expression of Interest for further Gemmology Courses

Tick	Course Name	Course Code	Price
<input type="checkbox"/>	Practical Gemmology		_____ NM
<input type="checkbox"/>	Synthetic, Gem Enhancements and Gem Alerts		_____ NM
<input type="checkbox"/>	Opal Appreciation (four weeks)		_____ NM
<input type="checkbox"/>	Diamond and Simulants		_____ NM

Tick	Course Name
<input type="checkbox"/>	Diploma in Gemmology (two years part-time)
<input type="checkbox"/>	Practical Diamond Grading (five days intensive)
<input type="checkbox"/>	Advanced Diamond Grading (two days intensive)
<input type="checkbox"/>	Diploma in Diamond Technology (one year)

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

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Darlinghurst NSW 2010

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email: nsw@gem.org.au

Queensland Division

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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

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2 Edward St
Glebe Tas 7000

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email: tas@gem.org.au

Victorian Division

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email: vic@gem.org.au

Western Australian Division

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Claremont WA 6910

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