

**Tax Invoice - Kodaly Music Education Institute of Australia  
NSW Branch Inc** **ABN: 89431661105**

**School/Individual Name:**

**Address** \_\_\_\_\_

**Email address:**

**Mobile number** (for emergency purposes) 04

**DATE:**

**From: KODALY MUSIC EDUCATION INSTITUTE of AUSTRALIA  
NSW Branch INC** **ABN: 89431661105**

**Regarding: BUILDING an EFFECTIVE MUSIC PROGRAM  
PRIMARY LEVEL 1** *presented by*

**Date:** *Wednesday April 8th - Friday 10th, 2015  
8:30 – 5:00 p.m.*

**Venue:** *Music Department Barker College, Waitara*

**Cost:** Member \$480  
Non-member \$595

*Become a member at [www.kodaly.org.au/memberships](http://www.kodaly.org.au/memberships)*

**PARTICIPANTS Names:** *(please write clearly so that Certificates may be prepared accurately)*

1.

2.

**TOTAL PAYMENT DUE:** \$ *GST is not applicable*

*Please choose 1 of the following payment options:*

1. *CHEQUE* made out to **KMEIA (NSW Branch) INC**

Please post to KMEIA (NSW Br) INC  
ROSE BLOOM - TREASURER  
PO BOX 603,  
FIVE DOCK NSW 2046

2. *ONLINE PAYMENT* as follows: **KMEIA NSW BR INC**  
ST GEORGE BANK  
BSB: 112 879  
ACCOUNT NUMBER: 153 921 273  
YOUR REFERENCE: SCHOOL NAME + AKC1  
(eg HAMILTON AKC1)

*Enquiries regarding Invoice:* ROSE BLOOM 02 9713 9235 M: 0431 213 056  
*Please notify us of online payments at [nsw@kodaly.org.au](mailto:nsw@kodaly.org.au)*