

# ATTENTION ALL YEAR 12 ANCIENT HISTORY STUDENTS



## STUDENT SEMINAR DAY ANCIENT HISTORY

The History Teachers' Association of Western Australia is one of the leading providers of student seminars and WACE History revision programs in Western Australia. We are a non-profit organisation and all our seminars are conducted by well-respected and experienced Ancient History teachers and WACE markers.

**DATE:** Saturday 26<sup>th</sup> August 2017

**TIME:** 9.00am – 12.40pm (Registration – 8.30am)

**VENUE:** MLC  
Stirling Highway  
Claremont

**COST:** STUDENTS: \$20 (pre-ordered and pre-paid tickets)  
\$25 (on the day)

**NOTE:** The current HTAWA Ancient History Good Answer Guides will be available for sale on the day.

### PROGRAM:

Unit 3: Egypt New Kingdom Egypt to the death of Horemheb OR Athens 481 – 440 BC OR Rome 133 – 63 BC

Unit 4: Egypt Thebes – East and West, New Kingdom Egypt Athens OR Sparta and the Peloponnesian War 440 – 404 BC OR Rome 63 BC – AD 14

(Notes will be provided)

### Plus FREE PUBLIC LECTURE 1-2pm

*“MYTH BUSTING: Tutankhamen, Akhenaten and the human element of intentional destruction in the Amarna Period”*

Alice McClymont, Egyptologist, from Macquarie University NSW



HISTORY TEACHERS' ASSOCIATION OF WESTERN AUSTRALIA

## STUDENT SEMINAR DAY REGISTRATION FORM ANCIENT HISTORY

To assist us with our planning and photocopying for the seminar please complete the following form ASAP and return to:

HTAWA Seminar Day  
PO BOX 1145  
SCARBOROUGH WA 6922                      **OR**                      Fax: 9204 5112

**NUMBER OF STUDENTS ATTENDING:** \_\_\_\_\_ **CONTACT NAME:** \_\_\_\_\_

**SCHOOL:** \_\_\_\_\_

**POSTAL ADDRESS FOR TICKETS:** \_\_\_\_\_

**CONTACT Phone:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Please circle the context you have been studying in 2017:

Egypt

Greece

Rome

**PAYMENT METHOD:**

- On the day (**\$25**) **OR**
- Pre-ordered and prepaid tickets (**\$20**) cheque or credit card

I enclose a cheque for the amount of: \$ \_\_\_\_\_

Please charge My Credit Card: Name: \_\_\_\_\_

Type of Card: Visa or MasterCard      Expiry Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Amount: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

*Thank you for your response and we look forward to seeing you on the 26<sup>th</sup>!*