Student Name:__________________  Parent Name:__________________

Year 7 Voluntary Contributions

A. VOLUNTARY CONTRIBUTIONS
Library Trust Fund  FEE CODE: LIB16
a. A tax deductible gift: Donation to Canberra High School Library Fund
   for one child ____________________________ $85.00 ☐
   two or more children attending school ________________ $140.00 ☐

 OR

b. Voluntary contribution  FEE CODE: VOL16
   for one child ____________________________ $85.00 ☐
   two or more children attending school ________________ $140.00 ☐

B. TEXTBOOK HIRE  FEE CODE: TEXT15
Textbook Hire Charge paid once on enrolment ________________ $60.00 ☐

C. SUBJECT CONTRIBUTIONS for Year 7 students

<table>
<thead>
<tr>
<th>Subject</th>
<th>FEE CODE</th>
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<tbody>
<tr>
<td>Art/Music</td>
<td>ARTS716</td>
<td>SCI16</td>
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<tr>
<td>English</td>
<td>ENG16</td>
<td>SHAPE16</td>
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<tr>
<td>Food</td>
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<td>SOSE16</td>
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<td>Maths</td>
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<td>SOS16</td>
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D. Band - Instrument Hire (only if student is participating)
FEE CODE--INS16
Half Year $80.00 ☐
Full Year 150.00 ☐

TOTAL AMOUNT I WOULD LIKE TO PAY $__________

Payment details over the page
EXCURSION TITLE: Voluntary Contributions

PAYMENT OPTIONS

1. **Payment is person** at school Front Office-between 8:15am & 2:30pm Mon-Fri
   EFTPOS facilities are available. Cheques made payable to Canberra High School

2. **Direct Deposit:**
   - Bank: Westpac
   - BSB: 032777
   - Acc. No.: 001113
   - Acc. Name: Canberra High School

3. **Canberra High School Website:** [www.canberrahs.act.edu.au](http://www.canberrahs.act.edu.au)
   (QUICKWEB)
   
   See front page for FEE CODE

4. **Phone Payments** – Credit cards Phone: 62057000 or 62057028

   __________________________________________

   **Please debit my** ☐ Mastercard ☐ Visa ☐

   Card Number:  □□□□□□□□□□□□□□□□□□□□

   Card Expiry Date: _________ Name on card: __________________________

   Parent/Carer:_________________________ Student Name: __________________________

   Total Amount Paid: $___________

   Cardholders Signature: __________________________

   Contact Phone number of Cardholder: ______________________________