

Student Name: _____ Parent Name: _____

Year 7 Voluntary Contributions

A. VOLUNTARY CONTRIBUTIONS

Library Trust Fund FEE CODE: LIB18

1. **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

2. **Voluntary contribution** FEE CODE: VOL18

for one child _____ \$85.00
two or more children attending school _____ \$140.00

\$ _____

B. TEXTBOOK HIRE FEE CODE: TEXT18

Textbook Hire Charge paid once on enrolment _____ \$60.00 \$ _____

C. MATHSPACE

Mathematics classroom teaching support tool \$15.00 \$ _____

D. SUBJECT CONTRIBUTIONS for Year 7 students

	FEE CODE			FEE CODE			
Art/Music	ARTS718	\$20.00	<input type="checkbox"/>	Science	SCI18	\$20.00	<input type="checkbox"/> }
English	ENG18	\$10.00	<input type="checkbox"/>	SHAPE	SHA18	\$20.00	<input type="checkbox"/> }
Food	FOOD718	\$30.00	<input type="checkbox"/>	SOSE	SOS18	\$10.00	<input type="checkbox"/> }
Maths	MAT18	\$10.00	<input type="checkbox"/>	Technology	TECH718	\$15.00	<input type="checkbox"/> }
LOTE	LOTE18	\$10.00	<input type="checkbox"/>				

\$ _____

TOTAL \$ _____

E. Band - Instrument Hire (only if student is participating)

FEE CODE--INS18

Half Year \$80.00
Full Year 150.00 \$ _____

TOTAL AMOUNT I WOULD LIKE TO PAY

\$



Payment options over the page

EXCURSION TITLE: Voluntary Contributions

PAYMENT OPTIONS

1. **Payment in 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
(QUICKWEB)

See front page for FEE CODE

4. **Phone Payments** – Credit cards Phone: 61420800 or 61420807

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: _____