



8 February 2017

HOW CAN YOU HELP MAKE A DIFFERENCE TO THE EDUCATION OF YOUR CHILD

Dear Parents and Caregivers,

As you are aware, voluntary contributions help provide our school with extra resourcing that supports the enrichment of your child's education. This funding allows us to purchase additional resources and or provide additional learning opportunities for your child.

Money collected through voluntary contributions this year will be allocated to providing additional resources to enhance school improvement.

The School Board has set the voluntary contributions for the following amounts:

- \$75.00 for one child or
- \$120.00 per family

Please note, you are able to contribute more or less than the set amounts if you choose. These contributions are applicable Preschool to year 6.

As a school we also appreciate the time that many families contribute as volunteers. Volunteering as a classroom helper, for special events and /or on excursions also assists us in providing rich educational opportunities for your children.

If you have any questions or comments on this idea , please don't hesitate to contact me.

Kind regards,
Matt Holdway

Please Note: The payment of these financial contributions is voluntary. The Education Act 2004 states that your child will not be refused benefits or services if you do not choose to contribute. Individual records of contributions are confidential.





INTRODUCTION OF PROGRAM REQUIREMENTS PAYMENT 2017

In 2017 Theodore Primary parents/carers have the option of paying for all excursions and incursions for the year in one payment. We request this payment be paid by Monday **20 February** (as the first excursion to the pool is on the 1st March). Parents and carers can still elect to pay for excursions and incursions as they arise. A list of all program requirements for 2017 is attached.

Occasionally class excursions will incur incidental costs but these will be kept to a minimum. Please note that the amounts below do not include costs for the Intensive Swimming Program for year 2 or school camps for years 3, 4, 5 and 6. Information for these will be sent out separately throughout the year.

Payments can be made by direct deposit, cash, cheque or credit card.

One-off Program Requirement Payment (due 20 February)

PRESCHOOL	Class _____
Healthy Harold – drug education program	\$10
Farmyard Nursery – Mugga Lane	\$19
Declan the Music Man Incursion	\$11
Pirate Pete Incursion	\$9
Reptile Incursion	\$8
Science Excursion	<u>\$20</u>
TOTAL	\$77

I give permission for my childto attend the school performances/activities listed above during 2017. I understand further details will be provided

Parent / Carer Signature

KINDERGARTEN	Class _____
Healthy Harold – drug education program	\$10
Swimming carnival – Queanbeyan pool	\$10
National Zoo & Aquarium	\$20
Canberra Theatre – Going on a	
Bear hunt	<u>\$17</u>
TOTAL	\$57

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Parent / Carer Signature





YEAR 1 & 2	Class _____
Healthy Harold- - drug education program	\$10
Swimming carnival – Queanbeyan Pool	\$10
Lanyon Homestead- James Diary	\$16
Canberra Theatre – Prehistoric Aquarium	<u>\$17</u>
TOTAL	\$53

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Parent / Carer Signature

YEAR 3 & 4	Class _____
Healthy Harold – drug education program	\$10
Swimming Carnival - Queanbeyan pool	\$10
Recycling – sustainability excursion	\$6
Geoscience excursion	\$6
Big Gig - School of Music	<u>\$6</u>
TOTAL	\$38

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Parent / Carer Signature

YEAR 5 & 6	Class _____
Healthy Harold – drug education program	\$10
Swimming Carnival – Queanbeyan pool	\$10
Indonesian Embassy – Geography unit	\$6
Museum- Migration Stories	<u>\$12</u>
TOTAL	\$38

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Parent / Carer Signature





Payment Advice Notice – Please complete

Family Name: _____ **Date:** _____

- For One Student \$75 per annum
- Per Family \$120 per annum

Student's name	Class	Payment For	\$
		Program Requirements for Child 1	
		Program Requirements for Child 2	
		Program Requirements for Child 3	
		Program Requirements for Child 4	
		Voluntary Contributions	
		Total payment	

Payment by: Cheque Cash Credit Card Direct Deposit

Please make cheques payable to Theodore Primary

Payment: Cash Credit Card Direct Debit Credit Card

Please debit my credit card account No.

_____/_____/_____/_____ Expiry Date: ____/____/____

For the amount of _____ payable to Theodore Primary School

Name on Card: _____ Signature: _____

Direct Debit:

School EFT Details: BSB -032777 Account No: 001834

Please include your surname in the reference field

