



2018 Voluntary Contributions Confidential Payment Record

Please complete this form and return it to the Front Office with payment

Number of Children currently attending Aranda Primary School (Preschool to Year 6) <i>(Please circle one option only)</i>	1 Child	2 Children	3 Children	4 Children +
Total Voluntary Contribution Amount	\$200.00	\$300.00	\$400.00	\$400.00

Please indicate below the breakdown of how you would like your voluntary contribution payment to be distributed:

	Amount
General Voluntary Contribution To support the school in providing additional teaching resources.	\$.00
Building Trust Fund (Tax Deductible) To support projects relating to the school buildings or outdoor areas.	\$.00
Library Trust Fund (Tax Deductible) To support the school providing additional library resources and library books.	\$.00
TOTAL	\$.00

Please provide the following information:

CHILD 1 NAME		CLASS	
CHILD 2 NAME		CLASS	
CHILD 3 NAME		CLASS	
CHILD 4 NAME		CLASS	

Available Payment Options

Online/Credit Card	Use the PAYMENT tab on the school website homepage www.arandaps.act.edu.au You will be redirected to a secure payment processing site hosted by Westpac Bank. Please note that we are unable to accept EFTPOS payments over the counter at the Front Office.
Bank Transfer	BSB: 032-777 Account: 000997 Please use your FAMILY KEY, STUDENT KEY (of oldest child) and the FEECODE VOLUNC as the description.
Cash	Please place cash in an envelope or zip lock bag with your child's name on it and return to the Front Office.
Cheque	Please make cheques payable to <i>Aranda Primary School</i> Please place cheques in an envelope or zip lock bag with your child's name on it and return to the Front Office.

I, _____ (name of person making the Voluntary Contribution) have contributed the amount of \$ _____ to Aranda Primary School as a Voluntary Contribution for 2018.

Payment has been made using the following method (please tick one option only):

BANK TRANSFER	<input type="checkbox"/>	CREDIT CARD (Westpac Quickweb)	<input type="checkbox"/>	CASH	<input type="checkbox"/>	CHEQUE	<input type="checkbox"/>
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Signature: _____ **Date:** ____ / ____ / ____

Please Note: No personal information is provided to the School Board or Parents & Citizens Association. All information regarding Voluntary Contributions remains confidential.