



Date _____ Receipt # _____

HELENA VALLEY PRIMARY SCHOOL

Uniform Shop 2017

CHILDS FULL NAME/S			
YOUR FULL NAME			
CLASSROOM # (Eldest child)		PHONE/MOBILE	
YOUR EMAIL			

ALL OF THESE DETAILS ARE ESSENTIAL

FACTION	
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Uniform Items

Please indicate quantity required	SIZE 2	SIZE 4	SIZE 6	SIZE 8	SIZE 10	SIZE 12	SIZE 14	SIZE 16	UNIT AMOUNT	TOTAL \$
School Polo									\$ 27.00	
Zip Jacket									\$ 42.00	
Faction Polo									\$ 27.00	
Dress									\$ 50.00	
Bucket Hat	SMALL:		MED:		LARGE:				\$ 16.00	
Other item/s										
TOTAL										

Once completed, the Form can either be returned to the Administration Office, the Uniform Shop, or you can email it to hvpsuniformshop@gmail.com

PAYMENT DETAILS

Orders to be paid by Direct Deposit (preferred) or cash prior to collection of items

BSB: 633 000
ACC No: 155788896
ACC Name: HVPS PC Uniform Shop

RE Direct Deposit: Please use your **CHILD'S surname and first name (or first initial)** as the reference/description. If you use this method, please email a copy of your receipt so that we can verify your payment and process your order quickly. Please ensure your details are completely filled in at the top of form for cross-reference of payment.

**PLEASE NOTE THAT THERE ARE NO EFT FACILITIES AT THE UNIFORM SHOP.
 BANK TRANSFER OR CASH PRIOR TO SALE**

Office Use Only

Payment Received CASH / EFT EFT Reference # _____
 All Items Collected YES / NO Receipt Issued YES / NO
 If no, note outstanding items

Processed by:

FM 01: Prices valid from 1st January 2017