



HACKHAM EAST PRIMARY SCHOOL

SCHOOL
Collins Parade
Hackham SA 5163
Telephone: 8382 3824
Fax: 8382 3054

KINDY
Arnold Drive
Hackham SA 5163
Telephone: 8382 6551
Fax: 8382 8265



2023 SCHOOL MATERIAL & SERVICES FEES

Attached is your invoice for School Fees.

The Compulsory School Materials & Services Fee has been established at **\$269.00** per student for 2023.

This money, together with Education Department Global Budget Grant, is used to provide your child with text books, educational materials, computing, sporting equipment, apparatus and equipment in all subjects during the Year 2023 course of study at the school. Stationery, art supplies and duplicating materials will also be provided throughout the year.

SCHOOL CARD

For families who qualify for Government financial assistance (School Card) there is an allowance which provides for school material and service charges to be paid in full. You can apply for School Card online at sa.gov.au/education/schoolcard (instructions are enclosed)

NOTE: This form needs to be completed and lodged EVERY year (even if you have been eligible in previous years).

PAYMENT METHODS

Payments can be made by Cash, Cheque, EFTPOS or Online via EFT. The schools EFT details are:

A/C Name: Hackham East PS BSB: 105-136 A/C No: 510448140

Please ensure the transaction description includes your family code / family name so it can be matched to your account eg STAN00 Stanley fees

Payment instalment plans can be negotiated but you **MUST** see the Finance Manager **BEFORE 31st March 2023** to complete appropriate paperwork.

PLEASE COMPLETE AND RETURN WITH YOUR PAYMENT

NAME OF STUDENT **Teacher**

NAME OF STUDENT **Teacher**

Please tick one of the following to indicate preferred payment method of school fees.

Full payment of \$269.00

I would like to negotiate part-time payments with the Finance Manager. My preference would be to pay per week / fortnight / month.

(Please circle appropriately)

.....
(Signature of Parent/Caregiver)

FOR VISACARD/MASTERCARD ONLY

CREDIT CARD PAYMENT AUTHORISATION

Please tick one

Card No:

VISA CARD

CCV No. (Last 3 digits on back of card)

MASTERCARD

Card Holders name:

Expiry date: / Amount: \$

Signature: