14 February 2017

Year 6 Shirts 2017

Dear Parents / Carers,

As in previous years we have a ‘Year 6’ polo shirt available to purchase as a senior school uniform. The shirt is navy, white and gold, an indicative design is shown below. All student names will be printed on the back of the shirt.

Cost: The cost of the polo shirt is $49.00.

The sizes below refer to the measurement across the front of the shirt. Size 8-16Y are youth sizes while S & M are adult sizes. Changes to shirt sizes cannot be made once orders are placed. Sample sizes (10y, 12Y and 14Y) are available at school for students to try on if needed. The shirts will be ordered as soon as we have exact orders and money from the students. The final date for orders and payment is 8 March 2017.

If you wish to order a shirt please fill in the order form and return it with payment to the office before Wednesday, 8 March 2017. You can alternatively now pay online by using the link on the Metella Road Public School website. Please complete all the necessary details, some of which are mandatory, before confirming payment details. A description of “Year 6 Shirt” is required. A receipt can be printed and/or emailed to you. Please remember if paying online, you are still required to return the attached permission form.

If you have any concerns, please do not hesitate to contact the office.

Mrs. B Adams
Relieving Assistant Principal

Mr P. D’Ermilio
Principal
Year 6 Shirts - Permission Form

My child _______________________________________ of class _______ would like to order: _____ (no. of shirts).

<table>
<thead>
<tr>
<th>Size</th>
<th>8Y</th>
<th>10Y</th>
<th>12Y</th>
<th>14Y</th>
<th>16Y</th>
<th>S</th>
<th>M</th>
</tr>
</thead>
<tbody>
<tr>
<td>To Fit Chest (cm)</td>
<td>41</td>
<td>43</td>
<td>45</td>
<td>47</td>
<td>49</td>
<td>49.5</td>
<td>52</td>
</tr>
<tr>
<td>Quantity Required</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I enclose $_____________ as payment for the order.

Parent/Carers Signature: ___________________________________ Date: _______________

------------------------------------------------------------------------------------------------------------------------------------

METELLA ROAD PUBLIC SCHOOL CREDIT CARD PAYMENT SLIP ONLY

NAME                  CLASS                  PAYMENT FOR:                      AMT PAID
_________________________________________     ____________________  ___________
_________________________________________     ____________________  ___________

NAME (as on Credit Card) ___________________________ EXPIRY DATE: ______

CREDIT CARD NO: _ _ _ _ _ _ _ _ _ _ _ _ _ _ TOTAL AMOUNT PAID: $___________

SIGNATURE _______________________________ CONTACT PHONE NUMBER: _______________

Method of Payment (Please Tick)
☐ VISA    ☐ MASTERCARD

***please note: MINIMUM CREDIT CARD PAYMENTS $20***