

I.C.A.S PAYMENT FORM

PLEASE **DO NOT** INSERT THIS FORM IN THE PAYMENT ENVELOPE. PLEASE STAPLE TO OUTSIDE OF ENVELOPE

*Please complete this Entry Form and return it to the Class Teacher by
Thursday 29th March 2018.*

LATE ENTRIES WILL NOT BE ACCEPTED.

We require a separate form for each student.

*One form covers all Assessments selected for the student named
and must be returned to the class teacher by
Thursday 29th March 2018*

NAME OF STUDENT : _____ Class: _____ Year Level: _____

I would like my child to participate in the Australian Schools Assessment for 2018.

Tick the box to indicate which Assessments your child will participate in:

- | | | | |
|--------------------------|-------------|--------------------------------------|----------|
| <input type="checkbox"/> | Science | Tuesday 29 th May 2018 | \$ 10.00 |
| <input type="checkbox"/> | English | Tuesday 31 st July 2018 | \$ 10.00 |
| <input type="checkbox"/> | Mathematics | Tuesday 14 th August 2018 | \$10.00 |

Total Amount \$ _____

Signature of Parent/Guardian

Date