P.W.S. Family Participation Scheme 2017

Semester 1 Form- **Due Friday 30th June**

Semester 2 Form- **Due Wednesday 13th December**

Record of Hours Claimed

Your name(s): _____ Date: _____

Family Account Name (See Invoice): _____ Name of Eldest Child: _____Class: _____

Contact phone #:_____ Semester 1 / 2 (please circle) Email address: _____

Date	Summary of Participation	Hours
	Total hours claimed	

I have the following professional skills / trade that I am willing to offer:

_____

Please return this form to the School Admin Office or email to: adminpws@pws.wa.edu.au by the due date.