MCDOWALL STATE SCHOOL P&C Association

Please be aware that it is Govt Policy for students not to make door to door collection unless accompanied by an adult.

STUDENT's NAME: _____ CLASS: _____

SPONSORSHIP RECORD SHEET

Word Count Prep (12 words) Years 1-2 (25 words) Year 3 (30 words) Year 4 (40 words) Year 5-7 (50 words)

Sponsor's Name	Amount Sponsored per WORD	Donation	Sponsor's Initials	TOTAL PAID	Sponsor's Initials

Parental Approval: I give permission for my child _____ to seek sponsors for the McDowall State School P&C Association Spell-a-Thon . _____ (Parent/Guardian)

Teacher's Certification: I certify that the bearer whose name appears above from Class _____ completed _____ words in the McDowall State School P&C Association SPELL-A-THON 2018.

Teacher's Name _____ Class Teacher's Signature _____

The bearer is a participant in the McDowall State School P&C Association Spell-a-thon. Please indicate amount of your sponsorship or a donation for this student.

SPELLATHON Date: Tuesday 7th August 2018.

Please return this Sponsorship Record Sheet to the class teacher by Monday 6th August, 2018.

PLEASE RETURN SPONSORSHIP MONEY IN A SECURELY NAMED ENVELOPE TO YOUR CLASS TEACHER or SCHOOL ADMINISTRATION BY **FRIDAY, 17th August 2018.**