



ACTIVITY CREDIT REQUEST FORM

Complete this form where your child/ren have/has not attended an activity due to illness or a family holiday.

To the Business Manager,

My Child _____ of Grade _____

DID/WILL NOT attend _____ excursion/incursion held on the
___/___/___.

I am requesting a family credit for the cost of this charge.

Thank you,

Parent/Guardian Name: _____

Signature: _____ Contact Number: _____

Classroom teacher signature: _____



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