



NAGLE
CATHOLIC
COLLEGE
EST 1994

SCHOOL CAMP/TRIP REFUND DIRECT DEPOSIT

Parent/Guardian Name: _____

Student/s Name: _____ Date: _____

Bank Account Details

Bank Name: _____ Account Name: _____

BSB: _____ Account No. _____

Parent/Guardian Signature: _____

Refund Amount: \$ \$1,700.00

Reason of Return: Sydney/Canberra Trip Rebate & Refund

Office Use Only

AOS Code/GST: _____

Payment Date: _____ JBN: _____

Signature of Business Manager/

Assistant Business Manager

PLEASE FILL OUT AND RETURN TO COLLEGE
Email: NagleAccounts@cewa.edu.au
Post: Accounts, Nagle Catholic College, PO Box 97, Geraldton WA 6531