

Student's name: _____

Class: _____

Parent's name: _____

Phone: _____

To purchase school uniforms you have 3 options:

- 1 - Visit your online shop, open 24/7, at the link listed below, items ordered online before midnight of Tuesday during terms 1,2,3&4 will be packed and delivered to the school front office Thursday for collection
 - 2 - Print off this order form, complete with product, quantity, sizes and credit card details and email to the email address list below *not to the school* , orders received before midnight of Tuesday during terms will be packed and delivered to the school front office Thursday for collection
 - 3 - Visit the uniform shop, address and open hours below
- *For security reasons, phone orders cannot be taken

UNIFORM	AW	SIZES AVAILABLE												QTY	COST	TOTAL
		4	6	8	10	12	14	16	S	M	L	XL				
Polo - Short Sleeve	41066	4	6	8	10	12	14	16	S	M	L	XL		\$42.00		
Polo - Long Sleeve	41066	4	6	8	10	12	14	16	S	M	L	XL		\$47.00		
Boss Top	41067	4	6	8	10	12	14	16	S	M	L	XL		\$55.00		
Summer Dress		4G	6G	8G	10G	12G	14G	16G	18G					\$70.00		
Skort - Sports - Navy		4	6	8	10	12	14	16					\$25.00			
Shorts - Sports - Navy		4	6	8	10	12	14	16	18					\$25.00		
Track Pant - Navy		4	6	8	10	12	14	16	18					\$29.00		
Pinafore - Box Pleat		4G	6G	8G	10G								\$79.00			
ACCESSORIES	AW	SIZES AVAILABLE										QTY	COST	TOTAL		
Bucket Hats	41068	S/S	S/M	M/L								\$15.00				
Folio Bag	41069	1S											\$12.00			
PRICES EFFECTIVE FROM 1st September 2020 & INCLUDE GST														Total		

Belgravia Apparel Uniform Shop
 10 Newton Rd
 Campbelltown
 Manager - Michelle Flanigan
 Phone - 0451 725 600
 Email - _campbelltown@belgraviaports.com.au
 Online Shop - <https://belgraviaportsonline.com.au/collections/seaford-primary-school>

Open Hours: Terms 1,2,3 & 4
 Monday - 8am - 12pm
 Tuesday - 1pm - 5.30pm
 Wednesday - 8am-12pm
 Thursday - 1pm - 5.30pm
 Saturday - 9am - 12pm



*Refer your online shop for details



*Please note shop hours will vary during school holidays

CREDIT CARD PAYMENT

Name on Card: _____

Address: _____

Card Number:

Card Expiry Date: / CCV Signature _____