



Name: .....

Address: .....

.....

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Childrens Names and Forms:

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The sum requested for **each Term for Voluntary Contributions** is:

Number Of Children	Termly Contribution	Per Month When Contributing By Direct Debit
1	£500	£125
2	£1000	£250
3	£1500	£375
4	£2000	£500

Please enclose a completed Direct Debit Instruction Form and tick below whether you wish to contribute monthly or termly

- (a) Monthly Contributions 1<sup>st</sup> 15<sup>th</sup>  
 1<sup>st</sup> or 15<sup>th</sup> of each month
- (b) Termly Contributions   
 (1<sup>st</sup> day of each term)

<b><u>CONTRIBUTION AMOUNT</u></b>
£ _____

Signed .....

Date .....

Please return this entire form with a completed Direct Debit form, Credit Card/Debit Card details or Cheques to:  
 Mrs Tamar Berman, Volunatary Contributions Co-ordinator , JFS School, The Mall, Kenton, Middx, HA3 9TE

**Thank you for your support and co-operation**