

Wish List Payment

Please send this form in to school with your child BEFORE the Book Fair closes

Child's name: _____

Class: _____

	Title	Price
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
	Total: \$	_____

Payment Receipt Number

BF20 02

Online Payment:

www.scholastic.com.au/payment

Be sure to choose **Book Fairs** payments, not Book Club.

You will receive an 8-digit receipt number with your credit card payment.

Record your receipt number below:

Please provide the following details:

First name: _____

Surname: _____

Daytime ph: _____

School: _____ Suburb/State: _____

Receipt Number							

Amount Paid					
\$					
			.		