

## MARINA VIEW SCHOOL - YEAR 5 (Rooms 17,18,19)

On Tuesday 2 February 2010 your child would be at Year..... in Room No..... with class teacher .....

### **\*\*\*Parents to purchase these outside school\*\*\***

Please ensure that all books are covered and neatly labelled so that we can start the year with pride.

Quantity	Code	Description	Subject
7	1B8	7mm ruled A4 exercise Book	1) Homework 2) English: Reading and Language 3) English: Draft 4) English: Spelling 5) Topic 6) 1 spare
2	3B1	Notebook	1) Weekly Spelling
2	1E8	7mm quads A4 size Maths Exercise books	1) Maths 2) Maths (spare) 3) Compass
2 1	200 leaf 200 leaf	Lined Refill Unlined Pad	Art
2	1B4	7mm ruled exercise book	Music /Learning Journal
1	A4	Sketching Pad (cartridge spiral bound)	Art

### **Other Essential Requirements:**

1. Pocket Dictionary.
2. Ruler 30 cm transparent hard plastic.
3. 2 Blue pens, 2 Red pens, 6 Hb pencils, 1 Eraser, 1 Large Solid Glue stick.
4. Set of Colouring Pencils, 1 6B Sketching pencil.
5. 2 x Clear File (20 sleeves).
6. Calculator.
7. Small paper scissors.
8. 3 Pencil Sharpeners
9. 2 Highlighters

**New children will also need to purchase an AFL Burgundy Folder \$2.00 from school office from 9.00am. to 12.00 noon on Thursday 28 January and Friday 29 January 2010.**

- **Please bring one box of tissues** to share with class.

**Uniform Shop** will be open from 9.30am to 12.00 noon on Thursday 28<sup>th</sup> January and Friday 29<sup>th</sup> January 2010.

### **SCHOOL LEVY:**

The school relies on the payment of this levy to continue to fund extension programmes and extra resourcing for our children.

<u>Number of children</u>	<u>Full Year</u>	<u>Paid before 31 March 2010 10% Discount</u>	<u>Paid on per term Basis</u>
<b>1 child</b>	<b>\$190</b>	<b>\$171</b>	<b>\$47.50</b>
<b>2 children</b>	<b>\$340</b>	<b>\$306</b>	<b>\$85.00</b>
<b>3 children</b>	<b>\$430</b>	<b>\$387</b>	<b>\$107.50</b>
<b>4 children</b>	<b>\$490</b>	<b>\$441</b>	<b>\$122.50</b>

n.b. Payment can also be made by Electronic Transfer to our bank account with ASB Westgate – Account Number: 12 3085 0091522 004. Please ensure your child's name and room number appears on our statement.

### **Remittance Advice**

From Mr/Mrs/Ms: \_\_\_\_\_ For : \_\_\_\_\_ Rm: \_\_\_\_\_  
Parent / Caregiver's Name
Child / ren's Name/s

School Levy \$ \_\_\_\_\_

**TOTAL ENCLOSED:** \$ \_\_\_\_\_