



MANDURAH CATHOLIC COLLEGE

UNDER THE PATRONAGE OF THE HOLY FAMILY

ABN: 92 040 944 280

Coodanup Drive Mandurah, WA 6210 • PO Box 615 Mandurah WA 6210 • 9531 9500 • mcc@mcc.wa.edu.au

HCC TUITION FEE DISCOUNT SCHEME

PARENT/LEGAL GUARDIAN DETAILS *(Please complete in full - no abbreviations)*

SURNAME

FIRST NAME

CENTRELINK CONCESSION CARD DETAILS

Family Health Care Card *(Family Card only not Child's Card)*

Pensioner Concession Card

CARD NO (CRN) _____ DATE OF EXPIRY *(in full)* _____

DETAILS OF STUDENTS ATTENDING THIS SCHOOL

SURNAME	FIRST NAME	YEAR LEVEL

PARENT/GUARDIAN DECLARATION

I DECLARE THAT

- The card is in the name of the person responsible for fee payment.
- I have NOT CLAIMED nor do I intend to claim Aboriginal Secondary Grants Scheme-ABSTUDY.
- The above students are NOT in receipt of any Bursary/Scholarship MORE THAN \$1,000.
- I will notify the school if my concession card status changes during the year.

PARENT/GUARDIAN'S SIGNATURE

SCHOOL OFFICER MUST SIGHT AND COPY THE CLAIMANT'S CARD

I HAVE SIGHTED AND COPIED THE CLAIMANT'S CARD AND CONFIRM THE DETAILS ARE CORRECT

NAME OF SCHOOL OFFICER

SIGNATURE

POSITION HELD

DATE