Toko Sch	ool and Districts 125	th Jubilee R	egistration	Form	Years Attended
Name:					
Maiden Name (if applicable)	<u> </u>				
Partners Name					
Childrens Name(s)					
Address				_	
Email				Phone	
Attending as Past:	Student Staff BOT Resident	Г/School Comm	nittee PTA I	Fundraising	
Special Requirements					
(dietary, disablity etc)					
Event	Cost per Person	Number Attending	Total		
Registration Fee Children -	Free				
Registration Fee - Early Bir	\$30		\$		
Registration Fee - if paid af	\$45		\$		
Friday Meet and Greet	\$10		\$		
Saturday Dinner and Dance Restricted to 400 tickets	\$70		\$		
Sunday Lunch pre ordered		\$10		\$	
Total to Pay			\$		
Payment Instructions Plea	se tick applicable box	l.	I	l	
Cash					
Internet Banking: We Date of Payment:	estpac 03-0758-0108162-0	0 Reference:	Your name		
Cheque: payable to 7	Toko School Jubilee Fund				

Please return this form to: Jubilee Registrations C/- Toko School 1057 East Road

or email to tokoschooljubilee@toko.school.nz

RD 22

Stratford 4392