

**ST PADDY'S TICKET PAYMENT SLIP**

PARENT NAME.....

CHILD/CHILDRENS NAME.....

SCHOOL YEAR/YEARS.....

CONTACT EMAIL.....

Would you be happy to help on a stall YES [ ] NO [ ]

I WOULD LIKE TO PURCHASE .....TICKETS OR .....FAMILY TICKET

I ENCLOSE CHEQUE/CASH FOR £.....

PLEASE MAKE CHEQUES PAYABLE TO **ST TERESA'S SCHOOL ASSOCIATION**