

PTA Uniform Service Exchange / Refund Form

Student Name		Original Order Number:	
Parent Name		Date	/ /
Exchange or Refund (please circle/highlight)		E	R
Item(s) Returned	Qty	Item(s) Required	Qty
		Item(s) collected: (Signed for by pupil)	
		Date: / /	

OFFICE USE ONLY

ALL TEAMS:	Tick	Initials	Date
Returned item checked and put back in container			
New item required given to pupil			

EXCHANGES ONLY – Wednesday Team	Tick	Initials	Date
Entered onto TradeGecko SO _ _ _ _ _			
CN _ _ _ _ _			

REFUNDS ONLY – Wednesday Team	Tick	Initials	Date
Entered onto TradeGecko CN _ _ _ _ _			
Email Treasurer			
Email Parent			