



ST PETER'S

PREPARATORY SCHOOL

SELLER REGISTRATION FORM - 2nd HAND UNIFORM

Name:

Name of
Child/ren:

Telephone
Number/s:

Address:

Email Address:

ITEM DESCRIPTION	SIZE	DATE RECEIVED	PRICE	DATE SOLD	DATE PAID
TOTAL			£ <input type="text"/>		

50% OF THE PROCEEDS OF THE SALE WILL BE SENT TO THE PERSON NAMED ABOVE.
THE REMAINING 50% WILL BE DONATED TO FOSP.



Thank you for your support!