



To be signed and returned to the School Management

ACKNOWLEDGEMENT OF SCHOOL FEES POLICY

I, _____, parent / guardian of

- _____ in class

- _____ in class

- _____ in class

Hereby confirm that I have received, read and understood the Regis School - Runda Fees Policy. I agree to abide by the terms and conditions detailed in this policy.

SIGN: _____

Date: _____

Received at School by:

_____ (name)

_____ (signature)

_____ (date)