

SECOND HAND BOOKS FOR SALE

STUDENTS' SURNAME:

FIRST NAME:

SIGNATURE OF STUDENT:PH.....

HOME GROUP: NUMBER OF BOOKS FOR SALE:

PA Initials

- This form must be completed **prior** to handing books in.
- The **name and home group on this form** must **match** that on the **book labels**.
- Attach label top and bottom only to front of book with **sticky tape**.
- To **donate** unsold books to Student Welfare place **'tick'** on **this form and book labels**.

Please note that the Parents Association receives 20% of all Sales.

Book Title	Sale Price	CD Incl. ✓	Return if Unsold ✓		PA Rec'd ✓
			Yes	No	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
Office Use Only	<u>No of books sold</u>	<u>No of books donated</u>	<u>No of books to be returned</u>		