

Sport & Recreational Fee Payment Application

Childs Name: _____

Childs Age: _____

Sports/Activity: _____

Sporting Fee Amount: _____

- \$500 per child for single parent family per year
- \$250 per child for single parents receiving an income per year
- Kinship and Out Of Home Care will receive \$500 per child per year, if the child is not covered by DHS.

Fees to be directly paid to/how: _____

Parents Signature: _____

Approved by: _____

(CEO or Deputy CEO)

Date _____

Please note: There are currently no funds available to support two working parents

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Njerrnda Aboriginal Corporation