



P: (02) 4655 8049 F: (02) 4655 3269
E: camdenpandc@gmail.com
W: camden-p.schools.nsw.edu.au
facebook.com/groups/1395075427380045/
ABN: 44013664846

Camden Public School Parents & Citizens Association Association

25 John Street
Camden
NSW 2570



TRIVIA NIGHT

- Date: Friday 16 June at 7pm
- Venue: CPS School Hall
- Tickets: \$15.00 per head- **bookings can be made per table or as individuals**
- Tables: 8-10 people
- Theme: Pick your own theme! (for your outfits and table décor)
- BYO: Your alcoholic drinks & food
- RSVP: Use RSVP form attached to this page and return it with payment to the school office before Friday 9 June.

Don't miss our Trivia/Social Night Fundraiser! This event is a great opportunity to catch up with friends and other parents without the kids... Don't be discouraged if Trivia is not your "thing", answers can be bought! Raffles, best dressed table and other games are happening throughout the night. It's all good fun, an opportunity to have a few laughs and come together as a school community.

If you have any questions please leave a message on the Camden Public School P&C Facebook page on the Trivia Night post or send an email to camdenpandc@gmail.com

The evening will be a relaxed and enjoyable child-free night for the adults of the Camden Public School community. We look forward to seeing lots of parents with their friends and family supporting this event.

Camden Public School P&C

Nick de Wilde
Relieving Principal

Camden Public School Trivia Night Booking Form

Please note we are accepting bookings for all. state if you wish to join a table or already have 8-10 people.

Host Name: _____ Theme : _____

Contact No: _____ Email: _____

I would like to make a **table** booking for:

8 tickets @ \$15 each (\$120) 9 tickets @ \$15 each (\$135) 10 tickets @ \$15 each (\$150)

Other guest names: (please note these can also be provided at a later date)

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

I have direct deposited \$ _____

PLEASE USE CHILD'S FIRST NAME AND FIRST LETTER OF LAST NAME FOLLOWED BY TRIVIA AS REFERENCE (Example: for Toby Morrissey reference would be TobyMTrivia)

Camden Public School P and C Association

BSB: 802-388

Acc: 100084631

Reference/Receipt Number: _____

I would like to pay by card \$ _____

Please charge my ☐ Visa ☐ Mastercard

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Expiry Date ____/____

CCV _____

Signature: _____

Signature: _____

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