



PAYMENT OPTION FORM

Please complete and return this form to the College, attaching your nominated authority form (if applicable)

Fee Payer Name: _____ Account Code: _____

Students Name/s: _____

Please nominate your method of payment from Option 1, or 2 by ticking the appropriate boxes

Option 1: Lump Sum Payment

A Discount per student is offered for this option if the Annual Tuition Fees are paid in full by the due date. Please refer to the current Schedule of Fees.

Credit Card - will be debited from your Credit Card with the appropriate discount processed

Direct Debit - will be debited from your account with the appropriate discount processed

Bpay * - to be in the College Bank account by the due date for the appropriate discount to be processed

Cheque (option available for the start of the year only)

Option 2: Payment in 10 instalments

Credit Card (College Scheduled Payment Plan): 10 x equal monthly instalments will be debited from your Credit Card on the 25th of each month (or nearest bank trading day) from February to November

Direct Debit (College Scheduled Payment Plan): 10 x equal monthly instalments will be debited from your account on the 15th or 30th of each month (or nearest bank trading day) from February to November

Bpay:* 10 x equal monthly instalments – **please ensure your remittance is paid by the due date** 15th or 30th of each month (or nearest bank trading day) from February to November

DECLARATION (to be signed by the parents/guardians as nominated on the student's initial enrolment form as the fee payer)

I/ We accept that the College requires us to nominate a scheduled payment plan and it is our responsibility to ensure there are sufficient funds in our nominated bank account to meet these payments when they fall due.

I/ We understand that if there are not sufficient funds to meet the scheduled payment and bank fees are incurred as a result, I/ We shall be responsible for payment of these charges.

I/ We understand that the signed authority will remain in force until all outstanding fees have been settled and any changes to my payment plan need to be submitted in writing.

I/ We acknowledge and understand that I/We are solely and jointly responsible for the Annual Tuition Fees to be paid in a timely manner and that these fees will be paid in full by the end of each school year.

I/We confirm that I/We have read the College Fee Policy and accept these terms and conditions.

Signed: _____

Signed: _____

Name: _____

Name: _____

Date: _____

Date: _____