



**Our Lady of Lourdes
Catholic School**

PAYMENT ARRANGEMENT FORM

To be lodged at the school office by 16th November, 2015

SECTION 1 – FAMILY DETAILS		
Name of each child at [name of school]	Class	
Parent/guardian 1		Parent/guardian 2
Name		
Signature		
	Date:	Date:

By signing this document each parent/guardian confirms their agreement to the payment arrangements outlined below. Separate copies of the form can be signed by each parent/guardian if convenient.

Where parents/guardians manage their finances separately from each other they may wish to split payment of fees between them by completing both columns below. However, most parents/guardians jointly pay fees and should only complete the left column below.

SECTION 2 – PAYMENT ARRANGEMENTS		
	Parent/guardian 1 or both if jointly paying	Parent/guardian 2 (only if not jointly paying)
Percentage of fees	<input type="checkbox"/> Jointly responsible or _____ % <input type="checkbox"/> Payment in full (complete section 3 or direct debit form attached) †	_____ % (only complete if not jointly paying) <input type="checkbox"/> Payment in full (complete section 3 or direct debit form attached) †
Payment method	<input type="checkbox"/> Scheduled Direct Debit (complete direct debit form attached) <input type="checkbox"/> Scheduled credit card (complete section 3) <input type="checkbox"/> Centrepay (contact school office to arrange) <input type="checkbox"/> Individual arrangement (to be approved by the Principal)	<input type="checkbox"/> Scheduled Direct Debit (complete direct debit form attached) <input type="checkbox"/> Scheduled credit card (complete section 3) <input type="checkbox"/> Centrepay (contact school office to arrange) <input type="checkbox"/> Individual arrangement (to be approved by the Principal)

Please note that these payment arrangements are administrative only and do not affect your ultimate joint and several legal liability for the entire amount of the fees.

In the event of default on payment arrangements, the total amount outstanding will become immediately due and the school reserves its right to take steps to recover it in full.

† Annual payments received by the school before 20 January attract a 2% discount on tuition fees .



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SECTION 3 – CREDIT CARD DETAILS

Complete this section where credit card has been chosen as a payment method.

- Payment in full - to be processed on the 20th January †
- 10 Payments to be processed on the 20th of each month from January to October. *On occasions where a scheduled payment falls due on a weekend, public holiday or during a school holiday break, the payment will be processed on the previous business day.*

Parent/Guardian 1

Cardholder name	<input type="text"/>	Amount	\$ <input type="text"/>
Card number	<input type="text"/>	Expiry date	<input type="text"/> / <input type="text"/>
Signature	<input type="text"/>		

Parent/Guardian 2

Cardholder name	<input type="text"/>	Amount	\$ <input type="text"/>
Card number	<input type="text"/>	Expiry date	<input type="text"/> / <input type="text"/>
Signature	<input type="text"/>		

SECTION 4 – CHILD CARE BENEFITS

The school is registered with the Family Assistance Office as a Registered Care Provider. Families may be eligible to receive child care benefits for school fees and levies relating to kindergarten students who are four years old until they turn five years old. No other children are eligible.

Do you intend to claim child care benefits?

No Yes, for this child:

SECTION 5 – FEE ASSISTANCE

Fee assistance may be available for families experiencing financial difficulty. Would you like someone from the school to contact you regarding fee assistance?

No Yes