



# ST MARY'S COLLEGE

## PAYMENT PLAN 2019

Every Family is required to complete this form and return to  
The College Finance Office by Monday 29 Jan 2019

FAMILY DETAILS			
Surname		Family Code (if known)	
Students Attending St. Mary's College			
Given Name	Year Level	Given Name	Year Level

Please indicate if you intend to apply for School Card in 2019 Yes/No  
Applications for School Card to be completed early in Term 1 2019

PAYMENT DETAILS		Payment in Full by 28 Feb 2019 5% Discount on Tuition Fee Only		<input type="checkbox"/>
Payment Frequency	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly	
Amount per Instalment	\$	First Payment Due Date		
		Last Payment Due Date		

<input type="checkbox"/> Direct Debit from my Bank Account	Please complete the attached Direct Debit Request form
<input type="checkbox"/> Direct Debit from my Credit Card	Please complete the attached Direct Debit Request form
<input type="checkbox"/> B-Pay	Refer to your school fees statement for your Biller Code and Reference No.

Please advise preferred e-mail address for accounts:

\_\_\_\_\_

I/We, ....., agree to pay by instalments to St. Mary's College, school fees owing which amount to \$..... I also undertake to advise the College finance office should my circumstances change with impact on my ability to meet this commitment, and I understand that it is my responsibility to do so. I also understand that this agreement does not preclude responsibility for payment of any other fees that may arise which for some reason are not part of this agreement.

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_