

INSTALMENT AGREEMENT

Statements are mailed out to families mid Term 1. If you are unable to pay your account in full by the end of Term 1 a payment arrangement must be formalised by completing Section 1 and Section 2 and returning the paperwork to Duncraig.SHS.Payments@education.wa.edu.au

Parent Name:

Contact Number:

Student Name:

Form:

SECTION 1: Payment options (please refer to your current Charges & Contributions Statement for amounts due) Please circle your preferred option.			
OPTION A	FORTNIGHTLY	20 EQUAL PAYMENTS	\$
OPTION B	MONTHLY	10 EQUAL PAYMENTS	\$

Start Date: _____

Expected Completion Date: _____

SECTION 2: We manage instalments via BPoint. Should your circumstances change please do not hesitate to contact the school on 6241 5457 to discuss alternative payment methods.	
Credit/Debit Card Details	
Name of Cardholder: _____	Mastercard <input type="radio"/> Visa <input type="radio"/>
Number: <input type="text"/>	
CV: _____	Expiry Date: _____
Date Debits to be made on: _____	
(Please inform the Finance team if your Credit/Debit Card details change)	

(In the event of failure to meet this agreement your details may be forwarded to an outside collection agency.)

DECLARATION:

I/We hereby acknowledge that the school Charges & Contributions for my child will be paid in full by the end of the School Year based on the above payment schedule. I/We will contact the school in writing should I/We be unable to commit to this agreed arrangement.

PARENT/GUARDIAN SIGNATURES

DATE
