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https://www.sflockleys.catholic.edu.au/

2025 PAYMENT PLAN AGREEMENT FORM

Family Name				Date	
Residential Address					
Suburb				Post Code	
Phone Number Home			Mobile		
Email Address					
Student Name			Student Name		
Student Name			Student Name		
All Pa	rent/Guardians m	ust complete this form and	I return to the Finar	nce Office by 22 November 2024.	
Payment Section – Please select your preferred payment option					
	1 instalment – 22 February				
	4 equal instalments – 22 February, 22 May, 22 August & 22 November				
	40 equal weekly	qual weekly payments – 1 February to 1 November			
	20 equal fortnigl	nightly payments – 1 February to 25 October			
	10 equal monthl	ly payments – 8 February to 8 November			
	Alternative payn	rnative payments – please indicate payment amount and regularity.			
	Amount_		Frequency		
Intended Payment Method – Please select one of the options					
	Direct Debit using my Bank Account details held on file				
	Direct Debit using my Credit Card held on file (AMEX not accepted)				
	B-Pay				
	Cash/Eftpos				
П	QKR!				
	QKIN;				

Changed Payment Details					
If your bank account or credit card details <u>have changed</u> , please complete with new details below:					
Credit Card					
Credit Card Holder:					
Credit Card Number:					
Expiry Date:					
Bank Account					
Name on Account:					
BSB: A/c No:					
Whilst considering your options, we encourage you to contact the Business Manager, Jamie Andrews should you feel that there may be circumstances that will make it difficult for you to satisfy your fee commitment in 2025.					
I/We, acknowledge that I/We are responsible for payment of fees and charges.					
Signed					
Signed					

Please save this form and email to $\underline{accounts@sflockleys.catholic.edu.au}$