



PAYMENT PLAN AUTHORITY FORM

I/We: _____

Student/s name/s: _____ Year level/s: _____

- Request and authorise St Luke's College to debit my/our below detailed account to pay for my / our child's school fees subject to the terms and conditions of St Luke's Fee Policy.
- Agree to ensure that there are sufficient funds available on the date of automatic payment.
- Agree to ensure that all debit payments will clear the school fees balance at the end of the payment plan in accordance with St Luke's Fee Policy.
- Agree that this authority remains in force until such time that I provide written instruction to amend or cancel this authority.

Payment Options: (tick one box)

- Option 1: Payment of school fees in **FULL** due by **11 April 2018**.
- Option 2: Payment of school fees in **three (3) equal quarterly instalments** due on **14 March, 13 June and 12 September, 2018**.
- Option 3: Payment of school fees in **nine (9) equal monthly instalments**, due on **14 March 2018 and each month thereafter through to 14 November 2018**.
- Option 4: Payment of school fees in **eighteen (18) equal fortnightly instalments**, starting **14 March 2018 and fortnightly thereafter through to 7 November 2018**.
- Option 5: Payment of school fees in **thirty-six (36) equal weekly instalments**, starting **14 March 2018 and weekly thereafter through to 14 November 2018. (Option 5 is ONLY available via direct debit payment plan.)**

Please Note: School fees must be finalised by:
21 September 2018 - for Year 12 students
14 November 2018 - for Year 7 to Y11 students

Payment Method: (tick one box)

- Eftpos, cash, cheque (available for Option 1 only)
- Direct Debit Regular Payment Plan
- Credit Card Regular Payment Plan

Payment Amount:

\$ _____

Please note: for details please refer to family statement (fees invoice) and fees schedule.

Direct Debit Payment from bank account:

BSB: _____ - _____

Account Name: _____

Account Number: _____

Bank Name: _____

Credit Card Payment :

Full name on Card: _____

Card Number: _____

Expiry Date: _____

Note: the school does not accept AMEX cards.

By signing, you agree to the College Terms and Conditions as stated in the Fees Policy.

Signature : _____

Date: ____ / ____ / ____

I/We would also like to contribute to the voluntary building fund (suggested amount \$250, fully tax deductible)

Please debit my chosen account on the ____ / ____ / ____ for \$250. Alternatively, please state donation for Building Fund \$ _____

Signature: _____ Date: ____ / ____ / ____

(only sign here if you wish to make voluntary donation)

FOR COLLEGE USE ONLY:

FAMILY CODE: _____

Date Received: ____ / ____ / ____

Date Actioned: ____ / ____ / ____

Actioned by: _____

St Luke's College - Bank Account Details

Bank: Catholic Development Fund

Account Name: St Luke's College Board Account

BSB: 086 006 **Account Number:** 545 070 180 **Ref:** Family code