



PAYMENT ARRANGEMENT ADVICE 2017 FEES – BPAY

This Payment Arrangement Advice must be completed and returned to the College Finance office to establish a BPAY payment arrangement of school fees for the 2017 College year.

Parent(s) / Caregiver(s) Surname: _____

Parent(s) / Caregiver(s) First Name: _____

Eldest Student Name and Class: _____

BPAY Frequency: Weekly Fortnightly Monthly Term

BPAY Amount: \$ _____

Start Date: /...../2017

Finish Date /...../2017

I/We have read the 2017 Schedule of Fees & Levies and commit to the repayment schedule as above which ensures that my / our fees will be paid in full prior to:

- End of Term 4 - 1 December 2017 (for fixed date arrangements)
- 31 December 2017 (for ongoing arrangements)
- 10 November 2017 (for Year 12 exiting families)

I / We agree to review my / our quarterly invoices for accuracy and extra charges that appear on these invoices and will ensure that any additional charges will be paid by the invoice due date.

Parent(s) / Caregiver(s) Name: _____

Parent(s) / Caregiver(s) Signature: _____

Date:/...../.....

Return to College Finance Office:

Fax -(07) 3814 8301

Email: [-ssprfinance@bne.catholic.edu.au](mailto:ssprfinance@bne.catholic.edu.au)

Post: -PO Box 4047 Springfield Q 4300

Drop: -into College Office