



## FEE PAYMENT OPTIONS 2020

Tuition and Boarding Fees are payable before the first day of each term, however, alternative payment options are available. If you would prefer to pay using one of the alternative payment options then you must advise the Accounts Department by completing and returning this form by **17 January 2020**.

Parent / Guardian Name: \_\_\_\_\_

Family Code or Student's Name: \_\_\_\_\_

### Payment Options *(please select one)*:

- Option 1 - Annual:  
Annual Fees Paid in Advance (1.75% discount applies if paid by 31-Jan-2020)
- Option 2 – Monthly 1<sup>st</sup> Day:  
Annual Fees Paid by 10 Instalments (Automatic Payment on the 1<sup>st</sup> day each month)
- Option 3 – Monthly 16<sup>th</sup> Day:  
Annual Fees Paid by 10 Instalments (Automatic Payment on the 16<sup>th</sup> day each month)

#### Incidental Fees and Charges

Note that other authorised charges appearing on your fee statement will be added to the next monthly automatic payment. You will be given the opportunity to review these charges prior to payment.

Should you wish to exclude voluntary levies from your payment authority please tick here

### Automatic Payment Details – Options 2 & 3 *(please select one)*:

- Use my automatic payment details from 2019.
- Direct Debit from my Bank Account (complete and return the attached form).
- Automatic Charge to my Credit Card (complete the details below)

Card Type:  MasterCard  Visa  American Express\*

Card Number:

Expiry Date:   /

Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

\*a surcharge of 1.95% applies to payments made by Amex card.

# ST HILDA'S ANGLICAN SCHOOL FOR GIRLS



**St Hilda's**  
ANGLICAN SCHOOL FOR GIRLS

## Direct Debit Request

### NEW

Post Office Box 34  
Mosman Park WA 6012

Tel (08) 9285 4100

Fax (08) 9285 4124

ABN: 75 126 309 510

Request and Authority to debit the account named below to pay

*St Hilda's Anglican School for Girls (Inc)*

<b>Request and Authority to debit</b>	<p><b>Surname (or company name)</b> _____</p> <p><b>Given names (or ACN/ARBN)</b> _____ ("you")</p> <p>Request and authorise <i>St Hilda's Anglican School for Girls (Inc)</i> – User ID No150073 to arrange for you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below subject to the terms and conditions of the Direct Debit Request Service Agreement.</p>
<b>Insert the name and address of financial Institution at which account is held</b>	<p><b>Financial institution name</b> _____</p> <p><b>Address</b> _____</p> <p>_____</p>
<b>Frequency and Amount of Debits</b>	<p>Debits will be charged monthly on the same day each month as requested by you. There will be ten (10) monthly debits between February and November unless amended by written request. The amount debited will be 1/10<sup>th</sup> of annual fees plus incidental charges as shown on your fee statement.</p>
<b>Acknowledgment</b>	<p>By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and <i>St Hilda's Anglican School for Girls (Inc)</i> as set out in this Request and in your Direct Debit Request Service Agreement (refer to <a href="http://www.sthildas.wa.edu.au/enrolments/schedule-of-fees/">www.sthildas.wa.edu.au/enrolments/schedule-of-fees/</a>).</p>
<b>Insert your signature and address</b>	<p><b>Signature</b> _____ (If signing for a company, sign and print full name and capacity for signing eg. director)</p> <p><b>Address</b> _____</p> <p>_____</p> <p><b>Date</b>     ___/___/___</p>
<b>Insert details of account to be debited</b>	<p><b>Name of account</b> _____</p> <p><b>BSB number</b>     [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ]</p> <p><b>Account number</b> [ ]</p>
<b>Family Code</b> _____	