



Melbourne Archdiocese
Catholic Schools



ST MARY'S SCHOOL
GEELONG

St Mary's School
66-68 Little Myers Street
(PO Box 959, Geelong VIC 3220)
Geelong VIC 3220

03 52299453
schoolfees@smgeelong.catholic.edu.au
www.smgeelong.catholic.edu.au

ABN 40 578 109 371

SCHOOL FEES & LEVIES COMMITMENT AGREEMENT

FEE PAYER'S NAME(S):

- | | |
|--------------------------|-------------------|
| 1. STUDENT'S NAME: | YEAR LEVEL: |
| 2. STUDENT'S NAME: | YEAR LEVEL: |
| 3. STUDENT'S NAME: | YEAR LEVEL: |
| 4. STUDENT'S NAME: | YEAR LEVEL: |

I/We agree to pay the Fees and Levies set by **St Mary's School, Geelong** each year and **elect to pay by the following payment method (please choose either Direct Debit Authority or Full Payment*)**:

- ☐ **Direct Debit Authority** (includes completion of a "Direct Debit Request (DDR)" form for St Mary's School, Geelong to debit funds from your nominated bank account based on frequency selected below)
- ☐ **FORTNIGHTLY:** 20 equal fortnightly instalments commencing the 3rd Thursday in February and concluding in November
- ☐ **MONTHLY:** 10 equal monthly instalments February-November (due 20th of each month or if Sat/Sun, first business day following)
- ☐ **QUARTERLY:** 4 equal quarterly instalments due the 3rd Thursday in February, May, August & November
- ☐ **ANNUALLY:** 1 full instalment due 28th February each year (if falls on Sat/Sun, first business day following)
- ☐ **Full Payment of School Fees & Levies made to school by 28th February (please tick option)**
- ☐ **Direct Deposit** (paid directly into school account) ☐ **Debit/Credit Card** ☐ **Cash**

I/We understand that this agreement **remains in place for the duration of my child(ren)'s enrolment at St Mary's School, Geelong**. It may **include any additional enrolments not named above** and that I/we remain responsible for paying any outstanding fees & levies unpaid after my/our last child leaves St Mary's School, Geelong. I/We also understand that any changes to this agreement must be made in writing to the Principal or a new form completed (**NB: Forms are available from the school office or on the website**).

FATHER/GUARDIAN'S NAME:

Signature: **Date:** / /

MOTHER/GUARDIAN'S NAME:

Signature: **Date:** / /

***NB: If wanting to set up an agreement different to above options please contact the school to arrange a meeting to discuss options with Principal and complete a "Private Fee Commitment Agreement" (NB: Reviewed each year)**

SPLIT BILLING:

We wish to split the payment of Fees & Levies between both parents/guardians as indicated below (**Please note that EACH parent/guardian needs to complete an INDIVIDUAL FORM to indicate their elected method of payment as listed above and will be billed separately for their portion of the account**):

- ☐ 50/50 Split of Fees & Levies
- ☐ Other % of Split: **1) Father/Guardian**% / **2) Mother/Guardian**%

1) NAME: **Signature:** **Date:** / /

2) NAME: **Signature:** **Date:** / /