



ST MARY'S  
COLLEGE

# 2025 PAYMENT ARRANGEMENT FORM

Please return completed form to [lgraves@smc.tas.edu.au](mailto:lgraves@smc.tas.edu.au)

| SECTION 1 – FAMILY DETAILS              |       | Year           |
|---|-------|----------------|
| Name of each child at St Mary's College |       |                |
|   |       |                |
|   |       |                |
|   |       |                |
| Parent/Carer 1                          |       | Parent/Carer 2 |
| <b>Name</b>                             |       |                |
| <b>Signature</b>                        | Date: | Date:          |

By signing this document each parent/carer confirms their agreement to the payment arrangements outlined below. Separate copies of the form can be signed by each parent/carer if convenient.

Where parents/carer manage their finances separately from each other they may wish to split payment of fees between them by completing both columns below. However, most parents/carer jointly pay fees and should only complete the left column below.

| SECTION 2 – PAYMENT ARRANGEMENTS         |   |   |
|--|---|---|
| Parent/carer 1 or both if jointly paying |   | Parent/carer 2 ( <i>only if not jointly paying</i> )  |
| <b>Percentage of fees</b>                | <input type="checkbox"/> Jointly responsible or          %  | % (only complete if not jointly paying)   |
| <b>Payment frequency</b>                 | <input type="checkbox"/> Annually<br><input type="checkbox"/> Monthly (February to November)<br><input type="checkbox"/> Fortnightly<br><input type="checkbox"/> Weekly   | <input type="checkbox"/> Annually<br><input type="checkbox"/> Monthly (February to November)<br><input type="checkbox"/> Fortnightly<br><input type="checkbox"/> Weekly   |
| <b>Payment method</b>                    | <input type="checkbox"/> Direct debit ( <i>complete direct debit form</i> )<br><input type="checkbox"/> Scheduled credit card ( <i>complete form</i> )<br><input type="checkbox"/> BPAY/BPoint ( <i>see details on invoice</i> )<br><input type="checkbox"/> EFT/bank deposit ( <i>see details on invoice</i> )<br><input type="checkbox"/> EFTPOS/cash/cheque ( <i>in person at school</i> )<br><input type="checkbox"/> Centrepay ( <i>contact Business Office to arrange</i> ) | <input type="checkbox"/> Direct debit ( <i>complete direct debit form</i> )<br><input type="checkbox"/> Scheduled credit card ( <i>complete form</i> )<br><input type="checkbox"/> BPAY/BPoint ( <i>see details on invoice</i> )<br><input type="checkbox"/> EFT/bank deposit ( <i>see details on invoice</i> )<br><input type="checkbox"/> EFTPOS/cash/cheque ( <i>in person at school</i> )<br><input type="checkbox"/> Centrepay ( <i>contact Business Office to arrange</i> ) |

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**Please note that these payment arrangements are administrative only and do not affect your ultimate joint and several legal liability for the entire amount of the fees.**

**In the event of default on payment arrangements, the total amount outstanding will become immediately due and the school reserves its right to take steps to recover it in full.**

**SECTION 3 – FAMILY DISCOUNT DETAILS**

A family discount can be claimed by families with **three or more** children at Tasmanian Catholic schools or colleges, in accordance with the Tasmanian Catholic Education Commission School Fees Assistance Policy.

We wish to claim the family discount (*only available where this form is lodged on time*)

If claiming the family discount, please provide details of siblings at Tasmanian Catholic schools or colleges **other than** St Mary's College. Enrolment may be verified with the named school or college.

| Sibling name | Year | Catholic school/college |
|--------------|------|-------------------------|
|              |      |                         |
|              |      |                         |
|              |      |                         |
|              |      |                         |
|              |      |                         |
|              |      |                         |
|              |      |                         |
|              |      |                         |

**Office Use Only**

|                      |     |     |     |
|----------------------|-----|-----|-----|
| Date Applied:        |     |     |     |
| Discount Applicable: | 10% | 20% | 30% |
| Signature:           |     |     |     |