

# Payment Arrangements

We understand that some families may not be able to make full payment of the Contribution & Charges by the due date. If you would like to set up a payment arrangement, please complete the form below and return it to the College

**Please note that payment of Charges is compulsory, and non-payment will result in the outstanding amount being referred to an external debt collection agency.**

*I would like to arrange a payment plan to pay Contributions and Charges for my child as indicated below:*

Student SURNAME \_\_\_\_\_

Student NAME \_\_\_\_\_

Current YEAR of student \_\_\_\_\_

Contributions (A & C) \$ \_\_\_\_\_ Charges (B) \$ \_\_\_\_\_

Charges from previous years carried forward \$ \_\_\_\_\_

TOTAL AMOUNT REPAYING \$ \_\_\_\_\_

**I will make payment by Credit Card**

☐ Monthly

☐ Fortnightly

Commencing \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Until \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**At a rate of \$ \_\_\_\_\_ per payment**

*\*Please note – All Charges must be paid in full before the Graduation Ceremony in Year 12*

.....  
**Name of Parent / Guardian**

.....  
**Signature**

.....  
**Date**

Ballajura Community College																	
Payment Arrangement: Credit Card Payment Authority																	
Please charge my credit card at the periods indicated above to the amount stipulated.																	
Card Type	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Expiry Date: ____ / ____      CVV: ____ ____ ____																
Card No.																	
Card Holder's Name .....																	
Card Holder's Email Address .....																	
Card Holder's Signature ..... Date .....																	

**By completing this form, you accept responsibility for ensuring there are sufficient funds in your account to cater for this payment and the College is advised of any changes to card details or expiry date.**