



KAPUNDA

High School

PLEASE RETURN COMPLETE FORM AS SOON AS POSSIBLE

IF NOT PAYING IN FULL BY FRIDAY 22 FEBRUARY 2019

AGREEMENT TO PAY BY INSTALMENTS – 2019 SCHOOL FEES

(Cash, Cheque, EFTPOS, Credit Card or Direct Bank Deposit)

Student Name / s: Homegroup

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I (Parent/Caregiver Name)

Agree to make weekly/fortnightly/monthly payments of \$

Final payment to be made before end of term 3 (27th Sept 2019) Total Due \$450 (Per student)

Payment Date	Amount	Balance

Choice of Payment (Please Circle) - Cash /Cheque /Credit Card /Direct Bank Deposit

BSB 105-006 Account 057125140 And put your Family Code and Description Fees

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Parent/Caregiver Signature

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Finance Officer Signature

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Principal Signature