



2024 Payment Agreement Form

Student Name: _____ Year: 4 Class: _____

Below is the 2024 schedule of fees for your student. Please tick the items you will be paying and select the payment method below. These items will then be invoiced to your student's account. The cost of \$5.00 for Life Education will be kindly sponsored by Rotary Club of Port of Townsville to allow all our students to participate in this valuable program.

Please note for all methods of payment, other than CentrePay, payments must be made by the nominated due date.

<input checked="" type="checkbox"/>	Due Date	Item	Amount \$	Information
<input type="checkbox"/>	18/02/2024	Student Resource Scheme	75.00	See attached information
<input type="checkbox"/>	13/05/2024	Excursion	8.00	Details to be advised
<input type="checkbox"/>	24/06/2024	Ceramics	20.00	Program conducted by a local Potter
<input type="checkbox"/>	31/08/2024	Billabong Excursion	38.00	Billabong Sanctuary – approx. cost TBC
<input type="checkbox"/>	02/09/2024	Arts Council	6.00	Details to be advised
<input type="checkbox"/>	04/10/2024	Life Educations	5.00	15-18 October
<input type="checkbox"/>	07/10/2024	Swimming Program	63.00	Lessons at Tobruk Swim School & transport
		Total:	\$215.00	

Total if not participating in all items \$ _____

Payment method

- CentrePay Please complete a CentrePay application form (one per family) and return to the office with this payment agreement form. By selecting CentrePay as your payment option you are agreeing to pay all of the above items. Your fortnightly payment amount will be calculated so that payments are finalised by the end of Term 3.
Initial here if you would like optional Instrumental Music covered by Centrepay _____
- EFTPOS or Cash In person at the office by the due dates noted above.
- BPOINT Invoices will be emailed to you and will contain the CRN and reference number to make a payment by BPOINT.
- Internet Banking Commonwealth Bank – Wulguru State School General Account
BSB: 064 819 Account: 00090866
Reference: student name

I, _____ agree to make the above payment by the due dates noted above.
(Parent/Carer name)

Parent/carers signature _____ Date _____