## Appendix 10 – Family Discount and Confirmation of Enrolment Form OUR LADY OF THE SACERD HEART CATHOLIC PRIMARY SCHOOL

## **CONFIRMATION OF ENROLMENT ~ 2017**

It is <u>ESSENTIAL</u> that this form be completed and returned to the office as soon as possible to <u>ENSURE</u> a place at Our Lady of the Sacred Heart Catholic Primary School in 2017 and to <u>ENSURE</u> you will receive discounts if you have more than one child at a Catholic School or College in the Diocese of Rockhampton.

FAMILY NAME (PRINT):  SECTION A: School Fee Assistance - Family Discounts		
STUDENT'S NAME	P-12	SCHOOL (Including XYZ School)
SECTION B: Current Fees P		
All my fees have been paid to date for 2016. YES NO OR I pay by direct debit.		
I would like to make an appointment to see the Principal		
<b>OR</b> I enclose payment of \$l have/will pay byon20 to meet outstanding fees for 2016		
SECTION C: School Fee Assistance - Concessions Families may be eligible for school fee assistance under the Concession Card Tuition Fee Discount and/or the		
Principal's Concession Scheme.	rice assistan	de drider the deficession dard runder the Discount drider the
The 70% Tuition Fee Discount is available for eligible 'means tested' government Health Care and Pensioner card		
holders. To start the application pr	ocess, please	e contact the school and provide a copy of your Concession Card.
The Principal's Concession Scheme is available on application to the Principal to ensure that confidentiality is maintained. Please tick if you would like to make an appointment to see the Principal:		
maintained. Flease tick if you wou	id like to mak	e an appointment to see the mincipal.
SECTION D: Account Detail	_	
Fees are payable quarterly on the due date indicated on your fee invoice or you may choose to pay by instalments. We will calculate your deductions and send you all relevant forms. Direct debits from your bank account, internet		
payment or payment by credit card through our office are all available options for instalments.		
Instalment Method – Please cho	nse one ontio	n·
Direct Debit Internet Pay	<u> </u>	Credit Card Deductions
Instalment Frequency – Please of	choose one o	ption
Monthly Fortnightly		Weekly
Please contact the Principal if you	wish to nego	tiate other payment arrangements.
PARENT/GUARDIAN SIGN	ATURES:	
Signature:		
Signature:		Date: