



Payment Plan Request Form

The Payment Plan outlined below refers to the **2026 SCHOOL YEAR**

Please use this form to indicate the payment arrangement that suits your families needs. Return the completed form Attn: Business Manager | accounts@sttmore.catholic.edu.au by 21 February 2026.

Parent/Guardian 1 Full Name

Parent/Guardian 2 Full Name

Child/Children's Full Name/s

I/We as stated above have chosen to pay the School Fees as outlined in the payment plan below:

Payment Frequency (please select one)

- Weekly Payments** (40 weekly payments of \$24.75 commencing 23/02/2026)
- Fortnightly Payments** (20 fortnightly payments of \$49.50 commencing 23/02/2026)
- Monthly Payments** (10 monthly payments of \$99.00 commencing 23/02/2026)
- Half Yearly** (2 payments of \$495.00 commencing 23/02/2026)
- Other, please specify:**

Payment Method (please select one)

- Direct Debit** (you will complete the Direct Debit Request Form and return to our Front Office)
- EFT Transfer** (you will set up the recurring payment through your personal banking using the Bank Details on your invoice)
- BPAY** (you will set up the BPay payment using the Biller Code shown on your invoice)
- Cash/EFTPOS** (you will make regular cash, EFTPOS or Credit Card (Visa/MasterCard) payments at our Front Office. *NO cash withdrawals*)
- Qkr! Smart Phone App** (you will download the Qkr! App and make payments through your smartphone)
- CenterPay** (you will arrange for regular deductions from your Centrelink payment to be made to pay your St Thomas More School fees) Visit servicesaustralia.gov.au or call us for more information.

Declaration

I/We intend to apply for School Card Yes No I/We have outstanding debt still to pay for previous years Fees Yes No

NOTE: If you have outstanding School Fees, please contact the school to arrange a meeting to discuss this.

By my/our signatures below, I/we acknowledge our responsibility for payment of Fees and Charges and will ensure these Fees are paid in accordance with our outlined Payment Plan and the School's Fee Policy.

Parent/Guardian 1 Signature

Date

Parent/Guardian 2 Signature

Date