



PAYMENT AGREEMENT FORM

I (parent of)

agree to pay the outstanding amount of \$..... being for:

- Materials & Services Charges (full payment by end of Term 2)
- Stephanie Alexander Kitchen Garden Levy (full payment within 14 days)
- Other (by negotiation - please specify)

I will continue these payments until my debt is paid in full. (Please note this figure will change if additional charges are applied during the course of this agreement – parent will receive Tax Invoice).

Please note: Materials & Services charges payment is required by the end of Term 2. All other monies owing must be paid in full within 14 days of invoice date unless negotiated.

Payment will be paid by:

- Direct Deposit into School Bank Account **BSB: 105 059 A/C: 245039340**
- Cash/Cheque/Credit Card
- Centrepay <https://www.humanservices.gov.au/individuals/enablers/how-set-centrepay-deductions/40451>

Payment will be made:

- Weekly - first payment of \$ _____ will be made on _____
- Fortnightly - first payment of \$ _____ will be made on _____

Payment in full of Material & Service Charges is required by the last day of Term 2

Please note: Default of payment with this agreement will result in the schools DEBT COLLECTOR managing the case

Family ID (as per statement):..... Phone Number :

Statement as at (date): Total Amount Payable: \$

Date:..... Signed on behalf of LPS:

I have applied for School Card Yes No

School Card (available mid-January): <https://www.sa.gov.au/topics/education-and-learning/financial-help-scholarships-and-grants/school-card-scheme>

Signature:

Please return to Loxton Primary School or email to dl.0760.finance@schools.sa.edu.au