

Fee Payer Name: _____

Student Name: _____

Campus: _____ Year Level: _____

Fee Payer Mobile: _____

Fee Payer Email: _____

Select Payment Frequency:

- 40 Weekly**
- 20 Fortnightly**
- 10 Monthly**
- 4 Quarterly**
- 1 Annual**

Note: Select a payment method: All plans other than Annual Payment due 28 February 2021 must enter into a Direct Debit or Credit Card Agreement. Suitable forms will be provided with your statement.

- Credit Card**
- Debit Card**
- Centrepay**

Identify siblings in either St Mary's College or partner school for discount calculations below.

Name _____ School _____ Year _____

Name _____ School _____ Year _____

Fee Payer Signature: _____ Date: _____

Please return completed form directly to St Mary's College Finance Office by **10 December 2020** at accounts@smdeaf.vic.edu.au.