



FINANCIAL OBLIGATIONS CONTRACT

I/we _____ Parent(s)/guardian(s) of
_____ Form _____ do hereby pledge on this day
_____/_____/_____ to pay the some of _____ dollars (\$ _____)
weekly () /bi-weekly () /monthly basis () to cover the cost of my child's school fees.

Repayment Period.

The Debtor shall re-pay the Creditor on a: (check one)

(A) - Monthly basis beginning on _____, 20____, in the amount of
\$ _____ to be paid on the ____ of every month ending on _____,
20____ or when the Amount Owed is paid-in-full.

(B) - Bi-Weekly basis beginning on _____, 20____, in the amount of
\$ _____ to be paid every fourteen (14) days ending on _____,
20____ or when the Amount Owed is paid-in-full.

(C) - Weekly basis beginning on _____, 20____, in the amount of
\$ _____ to be paid every seven (7) days ending on _____,
20____ or when the Amount Owed is paid-in-full.

(D) - Other. _____

Failing the above:

- I/we understand that if I/we nominate to pay on a weekly/bi-weekly/monthly basis and payments fall into arrears, then the remaining balance becomes immediately due and payable in full.

- I/we understand that failure to pay school tuition fees according to my/our nominated payment frequency, payments falling into arrears, or failure to communicate with the school may result in enrolment being reviewed and/or cancelled and debt collection procedures (including legal action) being implemented.
- All charges incurred in connection with the implementation of such debt collection procedures will be payable by me/us and added to the amount outstanding.
- I/we agree to inform Bates Memorial High School of SDA (BMHS) of any change to my/our personal and contact details promptly to ensure communication regarding school fees is being received.
- I/we acknowledge that any correspondence that is not returned to BMHS undelivered is deemed to have been received.
- I/we understand that information provided on enrolment paperwork may be used by BMHS in relation to the collection of school tuition fees.
- I/we understand that in the event of a family/marital breakdown, the person(s) who have signed this Agreement to Pay School Tuition Fees remain jointly and severally responsible for the payment of school tuition fees and BMHS may, at its discretion, elect to pursue any signatory for the full amount owed.

Parent/ guardian responsible 1

Signature

Date

Parent/guardian responsible 2

Signature

Date

Responsible 1 Details

Relationship to student

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Surname:	First Name:	
Address:		
Phone# Home:	Work:	Mobile:
Email:		Occupation:

Person Responsible 2 Details

Relationship to student

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Surname:	First Name:	
Address:		
Phone# Home:	Work:	Mobile:
Email:		Occupation:

Principal's Stamp and Signature

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Date: / /
 dd/ mm/ yyyy