

Payment Plan Application Form

Section 1 – Student Details

First Name	Surname	Year	Student Number	Authorised Total

Section 2 – Payment Details

<input type="checkbox"/> Option 1	EFTPOS and Cash Payments Pay by regular instalments at the College Administration.
<input type="checkbox"/> Option 2	BPAY (You must set this up with your bank directly) Payment details can be found on your Statement or Reminder notice.
<input type="checkbox"/> Option 3	Internet Banking (You must set this up with your bank directly) Account Name: Byford Secondary College BSB Number: 066-040 Account Number: 19904314 Reference: Student Name, Year and Student Number, i.e. John Smith Yr8 24458404.
<input type="checkbox"/> Option 4	Authority to Direct Debt Credit Card (Please complete details below)

Please select the payment frequency for your selected option:

- Weekly First Payment Date: ___/___/___
 Fortnightly Final Payment Date: ___/___/___ or Continue until authorised total paid in full.
 Monthly

Instalment Amount: \$ _____

Authority to Direct Debit Credit Card:

Card Holder Signature: _____

Credit Card Number:

Expiry Date: / Card Holder Name: _____

Visa MasterCard

Section 3 – Applicant Details

First Name:		Surname:	
Address:			
Email Address:			
Phone:		Relationship to Student(s):	

Section 4 – Statement and Declaration

1. **Debiting Your Credit Card Account**

- 1.1. Byford Secondary College undertakes to debit your Credit Card Account on the nominated day each period as per this agreement.
- 1.2. On the debit date, it is the Applicants responsibility to ensure funds are available in the nominated Credit Card Account.
- 1.3. It is the Applicants responsibility to advise the College if the nominated account is transferred or closed.
- 1.4. There is no additional charge for utilising this payment plan service.
- 1.5. If the direct debit fails up to three (3) times during this arrangement, then this will end the payment plan agreement.

2. **Changes to the Payment Plan**

- 2.1. The Applicant may cancel, request deferment of, or alter the Authority for the College to debit the nominated account by emailing the College Byford.SC.Finance@education.wa.edu.au at least three (3) business days prior to the next debit.
- 2.2. If the Applicant has selected option 1, 2 or 3 of the payment plan, they may notify the College of any changes to their arrangement by email to Byford.SC.Finance@education.wa.edu.au.
- 2.3. It is the Applicants' responsibility to ensure payments are made. If the College does not receive a recurring payment to the account in line with the selected option, then this payment agreement will end.

3. **Confidentiality**

- 3.1. Credit card account details will be kept in confidence and accessed only for the purpose of processing the Payment Plan via our BPoint payment plan system which is provided by the Commonwealth Bank of Australia.

By signing this form, I declare that I have read and fully understand the terms and conditions of this payment plan and agree to adhere to them.

Print Name:	
Signature:	
Date:	