

Tel: (021) 788-5910 Fax: 788-6398



74 Main Road, St James, 7945

# STAR OF THE SEA CONVENT SCHOOL

## METHOD OF PAYMENT OF SCHOOL FEES

### LEARNER DETAILS

SURNAME	
FULL NAME(S)	
DATE OF BIRTH	

1. Method of payment: (tick the suitable choice)

ANNUAL (minus discount if settled before 28 <sup>th</sup> February)	
QUARTERLY end of (February / April / July / October)	
MONTHLY (cash / cheque / EFT over 10/12 months: February – November)	
DEBIT ORDER (10/12 months: February – November)	

2. Monthly income: (tick the suitable choice)

	R0 – R10,000.00	R10,000.00 – R14,999.00	R15,000.00 – R20,000.00	R20,000 +
MOTHER				
FATHER				

**NB:** Please note that the information above needs to be supplied for BOTH parents, irrespective of their marital status and both parents must sign.

### UNDERTAKING

3. I hereby confirm that I am well aware that the payment of school fees is mandatory and I undertake to honour my financial responsibilities. If problems are experienced in this regard, I will immediately approach the fees administrator or the principal.

FATHER'S SIGNATURE

MOTHER'S SIGNATURE

GUARDIAN'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
**Principal: Alfonso Pereira**