

Parent/Guardian Signature

## St. James Catholic School Payment Options 2018-2019

2700 – 28th Avenue Vernon, BC V1T 1V7 Telephone: (250) 542-4081 Fax: (250) 542-5696

Date:
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Student(s) Name(s) & Grades:

- 1.
- 2.
- 3. 4.

	Poumont Ontions	
Method of Payment	Payment Options	
Lump Sum Payment     (5% discount)	At registration <u>or</u> Prior	to September 15, 2018
2. Pre-Authorized Debit	12 Equal Payments (must begin in July)	10 Equal Payments (must begin in September)
Pre-authorized debit form available. Include void cheque	Select Date	
		22 <sup>nd</sup> of Month
3. Post-Dated Cheques	Please date the 1 <sup>st</sup> or the 15 <sup>th</sup> of each month	
	10 Equal Payments (Sept - June) or 12 Equal Payments (July - June)	
4. Other: Please Specify (e.g. cash)		
Alternate Payment: If s tuition, please complete the fo	omeone other than you will be	paying <u>all or part</u> of the
	mowning details.	
NAME:	RELATIONSHIP TO STUDENT(S):	PHONE #:
		PHONE #:  % OF TUITION PAID BY PARENTS OR GUARDIANS
NAME:	RELATIONSHIP TO STUDENT(S):  % OF TUITION PAID BY OTHER	% OF TUITION PAID BY PARENTS OR
NAME: FORM OF PAYMENT (see above)	RELATIONSHIP TO STUDENT(S):  % OF TUITION PAID BY OTHER	% OF TUITION PAID BY PARENTS OR