



AGREEMENT TO PAY OVERDUE DEBT BY DIRECT DEBIT INSTALMENTS

I/We _____ agree that I/we am/are indebted to Tintinara Area School Governing Council Incorporated ("the school") for the sum of \$_____ and that I/we will pay this sum in accordance with the following terms:

1. I/we will pay an instalment of \$_____ every [week/fortnight/month].
2. I/we have provided a completed Direct Debit Request form.
3. The date of the first instalment will be __/__/__
4. Instalments will continue until the full amount of the debt is paid or until 31 December 2016, whichever occurs first. Should the debt not be paid in full by 31 December 2016, the Governing Council may, without any further notice, cancel this agreement and undertake legal proceedings to recover the sum outstanding.
5. Should two instalments not be paid on time, the Governing Council may, without any further notice, cancel this agreement and undertake legal proceedings to recover the sum outstanding.
6. I/we agree to notify the school immediately if I/we change my/our address or telephone number. I/we understand that, if I/we do not notify the school of such a change, the school may, without any further notice cancel this agreement and commence legal action for recovery of the amount outstanding.
7. This agreement will only be operative if a signed copy of it is in the hands of the Principal before the date stated in Paragraph 3 above.

Name: _____ (Parent/Caregiver)

Signed: _____ Date __/__/__

Name: _____ (Parent/Caregiver)

Signed: _____ Date __/__/__

Signed and agreed by Principal _____ Date: __/__/__

