

PAYMENT PLAN APPLICATION FORM - BPOINT DIRECT DEBIT

Parent Debtor to Complete

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| PARENT/CARER NAME: <i>(must be debtor of account)</i> | |
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Important Information: *Camps, excursions, incursions and optional events cannot be included in a payment plan and must be paid by their respective due dates. Only invoices included on this form will be included in your plan.*

| STUDENT NAME | SELECT ITEMS TO BE INCLUDED IN PAYMENT PLAN | AMOUNT |
|--------------|--|--------|
| | <input type="checkbox"/> Student Resource Scheme | |
| | Sports Academy: <input type="checkbox"/> AFL <input type="checkbox"/> Netball <input type="checkbox"/> Volleyball <input type="checkbox"/> Basketball | |
| | Instrumental Program: <input type="checkbox"/> Participation <input type="checkbox"/> Instrument Hire <input type="checkbox"/> Percussion | |
| | Certificate Course: <input type="checkbox"/> Health <input type="checkbox"/> Business <input type="checkbox"/> Hospitality | |
| | <input type="checkbox"/> Other: | |
| | <input type="checkbox"/> Student Resource Scheme | |
| | Sports Academy: <input type="checkbox"/> AFL <input type="checkbox"/> Netball <input type="checkbox"/> Volleyball <input type="checkbox"/> Basketball | |
| | Instrumental Program: <input type="checkbox"/> Participation <input type="checkbox"/> Instrument Hire <input type="checkbox"/> Percussion | |
| | Certificate Course: <input type="checkbox"/> Health <input type="checkbox"/> Business <input type="checkbox"/> Hospitality | |
| | <input type="checkbox"/> Other: | |
| | <input type="checkbox"/> Student Resource Scheme | |
| | Sports Academy: <input type="checkbox"/> AFL <input type="checkbox"/> Netball <input type="checkbox"/> Volleyball <input type="checkbox"/> Basketball | |
| | Instrumental Program: <input type="checkbox"/> Participation <input type="checkbox"/> Instrument Hire <input type="checkbox"/> Percussion | |
| | Certificate Course: <input type="checkbox"/> Health <input type="checkbox"/> Business <input type="checkbox"/> Hospitality <input type="checkbox"/> Other: | |
| | <input type="checkbox"/> Other: | |

Attach Additional Students Form to add students. Insert total for all students here: **TOTAL**

| | | | |
|---------------------------|--|-----------------------------|---|
| INSTALMENT AMOUNT | | FREQUENCY | <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly |
| FIRST PAYMENT DATE | | NUMBER OF DEDUCTIONS | |

I understand and agree that:

When you click on the link emailed to you, will be taken to Commonwealth Bank of Australia's BPOINT Direct Debit Request page.

Department of Education (DoE) understands that Commonwealth Bank of Australia (CBA) is collecting the personal information contained in your Direct Debit Request for the purposes of processing your Direct Debit Request and administering the BPOINT direct debit scheme for you. DoE understands that CBA will disclose this personal information to the Queensland Department of Education and to your financial institution named in your Direct Debit Request:

- a) for the purposes of processing your Direct Debit Request and administering the BPOINT direct debit scheme for you; and*
- b) for the purposes of reporting any unsuccessful / successful debit payment; and*
- c) in connection with any claim made relating to an alleged incorrect or wrongful debit.*

The CBA is obliged to comply with the Privacy Act 1988 (Cwth) and the Australian Privacy Principles for the purposes of processing your Direct Debit Request and administering the BPOINT direct debit scheme for you. If you are concerned about the CBA's handling of your personal information you should contact CBA in the first instance.

An email will be sent to your email address. Please click on the link within the email to complete your registration. Please note that the link will expire in 7 days. Direct Debits will not commence until the confirmation in completed.

| | | | |
|----------------------------------|--|-------------|--|
| SIGNATURE OF PARENT/CARER | | DATE | |
|----------------------------------|--|-------------|--|