



Catholic Regional College Sydenham
 Address: 380 Sydenham Rd, Sydenham 3037
 Telephone: 9361 0000 Facsimile: 9390 2096
www.crcsydenham.net ABN: 22 394 397 639

BOOK LEVY PAYMENT FORM

(compulsory for all VCE students)

Student/s Name: _____

Parent/s Name: _____

This form is to be returned during subject selection.

Please select a payment option for the \$600 e-learning levy:

<input type="checkbox"/> OPTION A Pay in full: \$600.00 Payment date: 18 August 2021	<input type="checkbox"/> OPTION B Pay in instalments: 2 x \$300.00 Payment dates: 18 August 2021 18 September 2021	<input type="checkbox"/> OPTION C Pay in instalments: 3 x \$200.00 Payment dates: 18 August 2021 18 September 2021 18 October 2021
---	---	--

Direct Debit Card Deduction

I hereby authorise Catholic Regional College Sydenham to debit my Visa/Mastercard

Name on Credit Card (please print): _____

Credit Card Number:

Expiry Date: _____/_____/_____ Signature: _____

Direct Debit Bank Deduction

I hereby authorise Catholic Regional College Sydenham to debit my bank account

Account Name (please print): _____ BSB: _____ Account Number: _____

Online Bank Transfer

Account Name: Catholic Regional College Sydenham
 BSB: 083-347 Account No: 690280643
 Ref: <Student Name>

BPAY

Billor Code: 1495
 BPAY Ref: <as per statement>

Centrepay

I, _____, hereby authorise Services Australia to debit \$100 from my
 _____, and pay this amount to Catholic Regional College, Sydenham 555 075 604

X for e-learning levy.

CRN number: _____

Date of birth: _____

Parent Name: _____ Signed: _____ Dated: ____/____/____