



Split Billing Amendment to Enrolment Contract

Split Billing Amendment This Application grounds are existing Eurobuseut Contract in line with players 11 and 12 of the CECC Eurobuseut
This Application amends an existing Enrolment Contract, in line with clauses 11 and 12 of the CECG Enrolment Contract. Once approved, it creates binding obligations on each party to the Enrolment Contract and replaces any previous split billing agreement.

Schedule Two - Split Billing Agreement Application

Parent A and Parent B, as identified in the table below, request the School Fees account for the Student, as identified in the table below, to be split in accordance with the information provided in this Application.

Parent A and Parent B accept that approval of this application by the Principal sets an ongoing responsibility of both Parents in relation to the payment of all school fees, levies and charges relating to the Student at the School and imposes binding obligations on each party. In the absence of a split billing application being made and accepted each Parent that signs an Enrolment Contract for a Student remains joint and severally liable for all school fees, levies and charges relating to the Student.

School Name:				Is there an e	Is there an existing split billing agreement?		
Student Name:				Yes	No		
Date split billing applies from (Commencement):			If Yes, date to	the existing split billing agreement			
We request:	:						
% of Fees	Parent A	Name	Paren	t A Address			
<u>'</u>							
% of Fees	Parent B Name		Paren	t B Address			
Note: total % m	ust add up to	100%					
Are any fees outstanding? (School to confirm with Catholic Education Office)							
Yes	No						
If yes, indicate the Total Amount and the amount(s) that Parent A and/or Parent B will be responsible for:							
Total Amount Parent A portion (in		\$) I	Parent B portion (in \$)			
Parent A and	Parent B ac	knowledge that accepta	ance of th	is application is at	the discretion of the School, Applications		

Parent A and Parent B acknowledge that acceptance of this application is at the discretion of the School. Applications for Split Billing that have been reached through mediation or legal processes are likely to be supported. Applications that have not been reached with the genuine consent of both parties or are determined to be attempts to avoid or delay the payment of school fees will not be considered.

This Request must be signed by both Parents before it can be considered by the School.

Please contact the Principal or Secondary Bursar or Business Manager to discuss your circumstances if you cannot afford payment of full fees.

Note: No student will be refused enrolment because of an inability, as distinct from an unwillingness, of a Parent to meet their school fee commitments.

Declaration

I accept that this is a request to apportion financial liability for school fees, levies and charges between Parent A and Parent B and agree to be invoiced and make payments for all school fees, levies and charges according to the above terms including any expenses incurred by the School as a result of late or non-payment. I acknowledge that I have read and understood the Enrolment Contract and the Split Billing Agreement and that by signing this I agree to be bound by these obligations:

Parent A Signature:	Relationship to Student:	Date:
Parent B Signature:	Relationship to Student:	Date:
Principal (or Delegate) Signature (on behalf of the Proprietor of the School ABN: 47 824 127 996):	Name of School:	Date:

Principal comment (if application is not approved)	