

PAYMENT ELECTION FORM 2017-2018 SCHOOL YEAR



Below is the election form for the 2017-2018 academic year whereby parents must elect their payment option.

Returning parents should complete and return the form only if they wish to change to a different billing option in 2017-2018. The default billing option is termly billing.

New parents entering the school in 2016-17 are required to complete and return this form. The first term's fee are due in full for all new parents on acceptance of a place for their child/ren. Thereafter, parents can opt for either monthly payments or termly payment options.

Please return this form to the Finance Department no later than Friday 9 June 2017 by e-mail to b.manager@lics.sch.zm or abursar@lics.sch.zm

Should we not receive a payment election form from you by the stipulated date your billing option will remain as *termly* for 2017-2018.
NO LATE APPLICATIONS FOR CHANGES TO BILLING OPTIONS WILL BE PERMITTED AFTER THE DEADLINE OF 9 JUNE 2017.

Pupil Surname	Pupil First Name	Class

PAYMENT ELECTION		SELECTION
OPTION 1	Annual payment - Full payment <i>due by 31 July 2017</i> failing which termly billing will apply. No late payments will be accepted for annual fees. Proof of payment must be submitted to the Accounts Department on or before the first day of term failing which children will be excluded from class from the first day of term.	<input type="checkbox"/>
OPTION 2	Termly payments - 3 payments per annum, <i>due on 31 July 2017 for Term 1; 30 November 2017 for Term 2 and 31 March 2018 for Term 3</i> , failing which children will immediately be excluded from class from the first day of term. Proof of payment must be submitted to the Accounts Department on or before the first day of term failing which children will be excluded from class from the first day of term.	<input type="checkbox"/>
OPTION 3	Monthly payments - 11 payments per annum due on the 3 rd (third) Friday of each month from July 2017 to May 2018. Proof of payment must be submitted to the Accounts Department on or before the third Friday of the month failing which children will be excluded from class from the first day of the following month.	<input type="checkbox"/>

IT REMAINS THE ONUS OF PARENTS/GUARDIANS TO PROVIDE PROOF OF PAYMENT FOR ALL PAYMENTS MADE.

Name of Parent/Guardian responsible for account payment: _____

Signature: _____ Date _____