



MARTIE DU PLESSIS SKOOL/ SCHOOL
ONDERNEMING VIR DIE BETALING VAN FONDSE
UNDERTAKING FOR THE PAYMENT OF FEES

GELDE IS VOORUITBETAALBAAR IN JANUARIE / FEES TO BE PAID IN ADVANCE DURING JANUARY

Reëlings kan getref word om gelde oor 11 maande te betaal (Januarie tot November)

Arrangements can be made to pay fees for 11 months (January till November)

LEERDER INLIGTING/LEARNER DETAILS

NAAM VAN LEERDER/NAME OF LEARNER: _____

TOELATING/ADMISSION NR: _____

GRAAD/GRADE IN 2023: _____

WORD DEUR OUER VOLTOOI/COMPLETE BY PARENT

Merk met X / Mark with X

SKOOL/SCHOOL

BUS

KOSHUIS/HOSTEL

SLEGS VIR KANTOOR GEBRUIK

OFFICE USE ONLY

SKOOL/SCHOOL R _____

BUS R _____

KOSHUIS/HOSTEL R _____

TOTAAL/TOTAL R _____

BETALINGSMETODE/PAYMENT METHOD (merk met X/mark with X)

EFT	<input type="checkbox"/>
KONTANT/ CASH	<input type="checkbox"/>

	DEBIET/DEBIT ORDER	
AKSIE DATUM	1STE / 1ST	<input type="checkbox"/>
ACTION DATE	15 DE / 15TH	<input type="checkbox"/>

SLEGS VIR DEBIETORDERS / ONLY FOR DEBIT ORDERS

BANKBESONDERHEDE/BANKING DETAILS

REKENINGHOUER/ACCOUNT HOLDER _____

BANK _____

REKENINGNOMMER/ACCOUNT NUMBER _____

TAKKODE/BRANCH CODE _____

TIPE REKENING/ACCOUNT TYPE _____

Debietorders wat geweier is sal permanent gekanselleer word en ouers moet per EFT oorbetaal.

Debit orders that was rejected will be permanently cancelled and parents will need to make an EFT payment.

NB! * Indien 'n leerder nie meer gebruik maak van busvervoer nie OF die skool verlaat moet die kantoor skriftelik 1 (een) maand vooruit, in kennis gestel word.

NB! * Please inform the office in writing, 1 (one) month in advance if the learner will NOT continue using the bus OR left the school.

Ouer/Voog sal verantwoordelik gehou word vir die VOLLE rekening indien kennisgewing nie betyds ontvang is nie.

Parent/Guardian will be held responsible for the FULL account if the notification have not been received on time.

Ek, _____ (volle naam en van) neem kennis van bogenoemde en onderneem om gelde te betaal soos vermeld.

I, _____ (full name and surname) take note of above-mentioned and undertake to pay fees as mentioned.

HANDTEKENING/SIGNATURE: _____ DATUM/DATE: _____

E-POS/EMAIL: _____ SEL/CEL NR: _____