Archdiocese of Wellington Attendance Dues Agreement

Between				
The Roman Catholic Archbishop of the Archdiocese of Wellington, ("the Proprietor")				
who	is the owner of	("the School")		
an	nd			
The	Parents/Caregivers (Delete one)			
	omplete all sections of this form – print cl			
	Title First names Surname			
1.				
2.	aid autial addus as			
Re	sidential address:			
		Post code:		
Davi	time Phone No:	Cell phone No:		
_	il address:	Passas sass		
	FRODUCTION The Parents/Caregivers have enrolled tl	he following student/s at the school:		
Stude	ent/s: First and middle names	Surname		
Sch Em	fice use only nool number: / rolment number: /	Gender: M / F Preference: Y / N Start date: Year level:		

- 1.2 The Proprietor of the School and the Minister of Education have entered into an Integration Agreement in terms of the Private Schools Conditional Integration Act 1975 ("Integration Act"). The Integration Agreement for the School provides that the Proprietor may enter into an agreement with the Parents or other persons accepting responsibility for the education of a child providing that as a condition of the enrolment and attendance of that child at the School, the Parents or other persons shall pay attendance dues.
- 1.3 Attendance Dues are used by the Proprietor for servicing of school debts, insurance of school buildings and other costs as specified in the Integration Act.

2. ATTENDANCE DUES PAYMENT

- 2.1 I/We agree to pay Attendance Dues to the Proprietor as approved by the Minister of Education from time to time in terms of the Integration Act and as a condition of enrolment of the student at the School.
- 2.2 I/We understand that in default of payment any recovery costs will be an additional expense to
- 2.3 I/We understand that payment of Attendance Dues will be invoiced in full once each year payable in full or, if we choose, by quarterly instalments unless alternative payment arrangements have been made with the Proprietor or the Proprietor's agent.

PRIVACY ACT 1993 - STUDENT ENROLMENT INFORMATION 3.

3.1 Your personal information will be collected and held by the Proprietor or the

Proprietor's agent and used for administering the invoicing and collection of attendance dues. Information about outstanding dues may be disclosed to other schools at which you have children attending. This information may be used for the purposes of collecting dues, and/or assessing eligibility for any rebate or write-off.

CATHOLIC SCHOOLS BOARD LIMITED 4.

- 4.1 The Proprietor has appointed Catholic Schools Board Limited ("CSBL") to administer the invoicing and collection of Attendance Dues on his behalf.
- CSBL maintains a central billing and administration system for Attendance Dues on behalf of the 4.2 Proprietors of Catholic Integrated Schools in the Archdiocese of Wellington.
- CSBL's offices are at the Catholic Centre, 22-28 Hill Street, Thorndon, Wellington. 4.3

ACKNOWLEDGEMENT 5.

5.1 I/We acknowledge that we have read and understand this agreement and agree to comply with the terms and conditions.

I/We agree to advise the Proprietor and/or CSBL in writing if our circumstances change.

Signature of parent/caregiver	Date
Signature of parent/caregiver	Date

Once completed, this form and all other enrolment information required by the Proprietor for the purposes of charging and collecting attendance dues, are to be forwarded to the Proprietor's dues collector:

CSBL, P.O. Box 12-341 Thorndon, Wellington 6144.

Contact information for all enquires – Phone: 0800 462 725;

Fax: 04 499 4804;

Email: office@catholicschools.co.nz

What are Attendance Dues?

Attendance dues are a charge made by the proprietors (legal owners) of all Catholic schools in the Archdiocese of Wellington as a condition of enrolment and attendance of students at their schools. The parents or other persons accepting responsibility for the education of the students concerned, having signed attendance dues agreement forms, have a legal obligation to promptly pay attendance dues.

Attendance dues are not donations (and therefore, are not tax deductible) and must not be confused with school and activity fees either. The latter are charged by many state and Catholic integrated schools but are payable to the school itself.

Collecting Attendance Dues

The proprietors of Catholic schools in the Archdiocese of Wellington have established a centralised system for charging and collecting attendance dues on their behalf. Under this system, proprietors co-operate with each other by pooling attendance dues for the common good of all proprietors and their schools.

The system is administered by Catholic Schools Board Limited (CSBL) on their behalf.

What are Attendance Dues used for?

Our proprietors belong to a National Attendance Dues Scheme which raises loans for its members, enabling them to fund new school building work and to re-model existing school buildings. These loans are repaid from attendance dues charged and collected by member proprietors. Each year, approximately 80% of attendance dues collected on behalf of the proprietors of Catholic schools in the Archdiocese of Wellington are paid into the National scheme for that purpose.

The balance of attendance dues collected in the Archdiocese of Wellington are used to pay insurance on integrated school buildings and some other building-related costs.

When do we pay Attendance Dues?

Your proprietor, or CSBL on the proprietor's behalf, will send you an attendance dues invoice in March each year. The invoice will show the full amount of attendance dues payable for the year but we offer you the following options for making payment:

- 1. You can pay the full amount by 31 March; or
- 2. You may pay by four equal instalments. The dates for payment of these instalments will be set out on the back of the invoice; or
- 3. If you prefer to pay by regular weekly, fortnightly, or monthly instalments you may do so but you must contact CSBL (see contact information below) to make the arrangement.

How do we pay?

Attendance dues can be paid by one of the following methods;

- Automatic payment authority
- Credit card
 - If you intend to use either of these methods please complete and sign the attached payment authority.
- Internet banking
 - Please contact CSBL (see contact information below) for information on how to pay using this method.

For 2014, suggested instalment payments are:

Frequency	Primary Student	College Student
Weekly	\$8.50	\$17.00
Fortnightly	\$17.00	\$34.00
Monthly	\$36.00	\$72.00
Quarterly	\$107.50	\$215
Annual	\$430	\$860

CSBL Contact Information:

Telephone: 0800 462 725 (toll free) *Option '2' for Attendance Dues* Ask for one of our attendance dues staff members:

Chris Fellows (Manager), Dave Willis, Christina Wilkinson or Sara Lewis.

Email: office@catholicschools.co.nz Fax: 04 499 4804



Payment of Attendance Dues by regular deductions from your credit cardTo authorise the office of CSBL to make regular deductions from your credit card. Please complete the details below and return to our office:

CSBL, PO Box 12 341, Thorndon, Wellington 6144

Name of Cardholder:
Credit Card number:
Expiry Date: / Card type: Visa / Mastercard (delete as applicable)
Frequency (please tick one)
Weekly Fortnightly Monthly Instalments (March/May/July/September)
First Payment date: /
Duration (please tick one)
Until further notice O 2014 only (last payment date /)
I hereby consent to CSBL making adjustments to this payment should additional students be enrolled to this account
Attendance Dues Account Number:
or
Student name(s)
Name:
Address:
Phone Number:
Signature of card holder: Date:



Automatic payment authority

1	Important - please tick ON	IE only Please print your details clearly in CAPITAL letters, using a pen
	Set up a new automatic paymen	tor,
	Change an existing authority for	
	Cancel an existing automatic pa	Day Month Year yment. If you're using this option, please complete only the details marked with an asterisk [*].
2	Payer account details - pa	y from this account
2.	Name of your bank	Branch Sranch
	Name of account	
	On behalf of	
	Iname if other than you!	
	*Bank account number	Bank Branch Account number Suffix
	Details to appear on my bank	statement
	Your particulars (if required)	Your reference (if required)
	Your code (if required)	
3	Frequency and amount -if	replacing an existing authority only enter details to be changed
	First payment date	2 0 Last payment date* 2 0 or until further notice
	- and the construction of	Day Month Year Stick
	*Fixed amount	weekly fortnightly four weekly monthly two monthly quarterly ball yearly yearly
		S S
	Amount in words	Western School and Control and
	Variable amount (tick one) Complete if applicable	Variable first amount Variable last amount Variable amount S
	Amount in words	
4	Payee details – pay to th	e credit of
	Name of bank	WESTPAC Branch MOLESWORTH ST
	*Name of account	CATHOLIC SCHOOLS BOARD LTO
	Bank account number	03 0518 0205019 02
		Bank Branch Account number Suffix
	Description of payment to app	
	Your particulars (if required)	Your reference (if required)
	Your code (if required)	
5	Terms and conditions	
0.40	Terms and conditions	
		reasonable care and skill to give effect to the the order or priority of payment by it of any money in accordance with this or any other authority or cheque which I/we may now
		ons given in this authority have been given by or in the future give to the Bank or draw on my/our account pose of a business, the Bank accepts those the Bank may in its absolute discretion refuse to make any one or
	directions withou omission to make	t any responsibility or liability for any refusal or more payments in accordance with this authority where there are insufficient founds available in professional and the payment of the payment or for late payment.
	 the Bank accepts 	on to follow such directions this authority may be terminated or reduced by the Bank or
	of the information on this authority	a contained in the payment information fields the payee without notice to me/us in respect of the payments detailed over
		this authority will remain in force for all payments made in good faith notwithstanding my/our death or bankruptcy or any other
	the future between	ubject to any arrangement existing now or in revocation of this authority until notice or my/our death or bankruptcy or other revocation is received by the Bank
	my/our account the Bank may in it	 all current Bank and Government charges for this service in fosce from time to time are to be debited to my/our account.
6	Authorisation	
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Nam	ne of account	
*You	ur signature	
Con	tact phone number STD/Cell	Daytime Day Month Year
Join	it signature	20
Con	tact phone number	Daytime Day Month Year
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