

**BETALINGSOORENKOMS  
AANGEGAAN DEUR LAERSKOOL DELMAS PRIMARY**

MET \_\_\_\_\_

OP \_\_\_\_\_

**TEN OPSIGTE VAN DIE BETALING VAN SKOOLGELD/KOSHUISGELD VIR 2011**

NAAM VAN LEERLING: \_\_\_\_\_ GR \_\_\_\_\_

IS U KIND IN DIE KOSHUIS?

JA  NEE

**BETAALWYSE WAAROP OOREENGEKOM WORD**

(Merk met X in die blokkie van u keuse)

<b>A</b>	Volledige vereffening van skoolgeld voor 31 Jan 2011 (1 maand korting toegestaan op skoolgeld)	<b>B</b>	12 Kontant-/Tjekpaaielemente – vooruitbe-taalbaar. Eerste paaielement betaalbaar met inskrywing
<b>C</b>	Kwartaalliks – 4 paaielemente betaalbaar voor die 7de dag van elke kwartaal	<b>D</b>	Aftrekorder. Ouers tref self reëling met bank. Korting van ½ maand per jaar sal teruggeskryf word na u rekening teen die einde van die jaar.
<b>E</b>	Bankinbetaling: ABSA Rekeningnaam: Laerskool Delmas Rekening nommer: 850 750 017 Naam van kind/rekeningnommer as verwysing		

**VOORWAARDES VIR BETALING VAN SKOOL- EN/OF KOSHUISGELD:**

*Let wel:* Skool- en koshuisgeld is **VOORUITBETAALBAAR**, bv.  
maandeliks voor die 7de dag van die maand,  
kwartaalliks op die 1ste dag van die kwartaal.  
Rente is betaalbaar op agterstallige bedrae.

**PERSOON VERANTWOORDELIK VIR BETALING VAN SKOOL- EN/OF KOSHUISGELD**

(Merk X in toepaslike blokkie)

Van en volle name van rekeningpligtige

A. Vader

\_\_\_\_\_

B. Moeder

\_\_\_\_\_

C. Ander persoon

ID NOMMER: \_\_\_\_\_

SEL NO: \_\_\_\_\_

TEL NO: \_\_\_\_\_

Ek verklaar dat: indien ek in gebreke bly om enige van die betalings stiptelik na te kom die volle balans van die skoolgeld en/of koshuisgeld vir 2011 verskuldig aan Laerskool Delmas Primary onmiddellik opeisbaar en betaalbaar sal word. Indien die skool verplig word om enige wettige stappe teen my te neem ten einde die agterstallige bedrag in te vorder ek die verantwoordelikheid aanvaar om aanspreeklik gehou te word vir alle prokureurskoste op prokureur- en kliënteskaal plus invorderingskommissie en rente op die agterstallige bedrag ter sprake. Hierdie kostes sal bereken word in pas met die huidige wetlike norm in Suid-Afrika.

Ek bevestig dat die inhoud van hierdie dokument waar en korrek is en dat ek ten volle bevoeg en in staat is om hierdie dokument te onderteken.

\_\_\_\_\_  
HANDTEKENING VAN REKENINGPLIGTIGE

\_\_\_\_\_  
DATUM

**PAYMENT AGREEMENT  
BETWEEN LAERSKOOL DELMAS PRIMARY**

AND \_\_\_\_\_

ON \_\_\_\_\_

**REGARDING THE PAYMENT OF SCHOOL FEES / HOSTEL FEES FOR 2011**

NAME OF LEARNER: \_\_\_\_\_ GR \_\_\_\_\_

IS YOUR CHILD IN THE HOSTEL?

JA  NEE

**PAYMENT METHOD AGREED UPON**

(Mark your choice of payment with an X in the block)

<b>A</b>	Total payment of all school fees before 31 Jan 2011 (1 month discount – only applicable to school fees)	<b>B</b>	12 Cash-/Cheque payments – paid in advance. First installment payable with registration.
<b>C</b>	Quarterly payments – 4 installments payable before or on the 7 <sup>th</sup> day of each term.	<b>D</b>	Money Order – monthly deduction. Parent must make arrangements with bank. Discount of ½ month per year on school fees will be credited to your account at the end of the year.
<b>E</b>	Direct deposit into school account: ABSA Account name: Laerskool Delmas Account number: 850 750 017 Name of child / account number as reference.		

**CONDITIONS FOR THE PAYMENT SCHOOL AND/OR HOSTEL FEES:**

*Note:* School and hostel fees are payable in **ADVANCE**, e.g.  
monthly before the 7<sup>th</sup> of each month,  
quarterly before the 7<sup>th</sup> day of the term.  
Interest will be charged on all amounts in arrears.

**PERSON RESPONSIBLE FOR THE PAYMENT OF SCHOOL / HOSTEL FEES**

(Mark with an X in the block)

Name and surname of responsible person:

A. Father

\_\_\_\_\_

B. Mother

\_\_\_\_\_

C. Other

ID NUMBER: \_\_\_\_\_

CELL NO: \_\_\_\_\_

TEL NO: \_\_\_\_\_

I declare that: If I do not follow the payment method agreed upon and my account gets into arrears, the total amount of school fees or hostel fees still outstanding for 2011 becomes immediately payable to Laerskool Delmas Primary. If the school must constitute any legal action towards me for the payment of amounts in arrears, I accept the responsibility to be liable for all attorney fees on an attorney-client scale plus collection commission and interest on the amount in arrears.

I confirm the correctness of the information in this document and declare that I am competent to sign this document.

\_\_\_\_\_  
SIGNATURE OF RESPONSIBLE PERSON

\_\_\_\_\_  
DATE