



REQUEST FOR REFUND

100% registered financial debtor details:

Name _____ Phone _____

Address _____ Email _____

Student details:

Name _____ Year _____

request a refund of \$ _____ paid for _____

Reason for refund: _____

I understand and agree that:

1. A refund may not be made to me or be made in full or in part, having regard to the associated expenses already incurred by the school, and the school's refund guidelines provided to me.
2. The school receipt for the original payment is attached / not attached (please circle).
3. The transport cost component is non-refundable.
4. My details will be kept confidential and will not be used for any other purpose.
5. My refund be made:

as a **CREDIT** against my child's account at the school applied to _____

to my **BANK ACCOUNT** via electronic funds transfer (EFT) (please complete details below)

_____/_____/_____
Parent/Debtor Name Parent/Debtor Signature Date

Bank Account Details:

Account Name: _____

BSB: _____ **Account Number:** _____

Bank: _____ **Branch:** _____

(School Use Only)

Inv. No: _____ Amount: _____ Rec No: _____ C/Note No: _____

Inv. No: _____ Amount: _____ Rec No: _____ C/Note No: _____

TRA INV Created No: _____ Zero Rec No: _____ Date: _____

APPROVED Refund Amount Approved: \$ _____ **NOT APPROVED**

_____/_____/_____
Approvers Signatures Date