

2025 – Year 8 – SRS & User Fee Payment Form**Section 1: Student Details**

Student Name	
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Section 2: SRS Category and User Fees

SRS Category 2025	SRS Fee Payable	Option Selected
Student Resource Scheme fee	\$416.00	
Less Textbook Resource Allowance – Government payment	-\$155.00	
TOTAL SRS fees payable	\$261.00	<input type="checkbox"/>
User Fee Category 2025	User Fee payable	Option Selected
User fee (photocopying, various required computer software, Training programs, sport costs) Full list of user expenses in the User resource list	\$101.00	<input type="checkbox"/>
TOTAL User fees payable	\$101.00	
TOTAL COMBINATION OF SRS AND USER FEES PAYABLE	\$362.00	<input type="checkbox"/>

Section 3: Payment Arrangement

Please select the preferred payment option.

Payment options	Instalments	Amounts	Option Selected
1. <input type="checkbox"/> A single payment for the full year's fee on or before 22 January 2025 or before student commences at CHSHS.		\$362.00	<input type="checkbox"/> Cash/EFTPOS <input type="checkbox"/> BPOINT/Qparents <input type="checkbox"/> Centrepay <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Internet Banking
2. <input type="checkbox"/> 3 Instalments \$190.00 on or before 22 January 2025 or before student commences at CHSHS on or before Friday 16 May 2025 on or before Friday 8 August 2025	Instalment 1: Instalment 2: Instalment 3:	\$190.00 \$86.00 \$86.00	<input type="checkbox"/> Internet Banking Please note: The nominated primary fee payer will receive invoices ONLY
3. <input type="checkbox"/> An instalment plan as negotiated with the school through the Textbook Office.	<input type="checkbox"/> weekly <input type="checkbox"/> fortnightly <input type="checkbox"/> monthly	\$ _____	

Centrepay deduction - complete your details below (not student's)

Family name _____ Given name _____

Your date of birth: ____/____/____ CRN: _____ - _____ - _____

Payment to be deducted from: ☐ Family Tax Benefit ☐ Newstart ☐ Pension

Fortnightly amount \$ _____ per child / family (please circle)

Section 4: Parent Signature

Parent/Carer name			
Parent/Carer signature		Date	