

## Invoice Information for School Fees 2019-20

<b>Section 1</b> <b>STUDENT &amp; PARENT/GUARDIAN INFORMATION</b>	<b>One form required for each student.</b>
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Student family name	First name
Anticipated grade at H.I.S.	Anticipated first day of school (D-M-Y)
<input type="checkbox"/> Father <input type="checkbox"/> Mother Family name	First name
<input type="checkbox"/> Father <input type="checkbox"/> Mother Family name	First name

Parents/Guardians are responsible for the payment of all school fees but may arrange to have payments made on their behalf.

School fees will be paid by (mark applicable box/es):

parents/guardians - complete Sections 2 and 4  
 employer - complete Sections 3 and 4  
 third party - complete Sections 3 and 4

<b>Section 2</b> <b>PARENT/GUARDIAN INVOICE ADDRESS</b>	<b>To be completed <u>only by parents who are paying school fees privately</u>. All school fees will be invoiced as they apply to the student above.</b>
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Street		
Postal code	City	Country
Email address for invoices	Phone	

<b>Section 3</b> <b>EMPLOYER/THIRD PARTY INVOICE ADDRESS</b>	<b>To be completed <u>only by employer or third party paying school fees on behalf of parents</u>. All information as well as authorising stamp and signature are required.</b>
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We agree to make payment of the Administration Fee required with the application. We understand that payment of this fee does not constitute an offer of enrolment from H.I.S. If enrolment or re-enrolment is offered to and accepted by the parent, we agree to making school fee payments to H.I.S. as follows (mark applicable box/es and complete invoice information below):

the total amount of school fees according to the H.I.S. Statement of Fees, including, if applicable, the Technology Fee, Grades 11 or 12 IB DP Pamoja online course fees and/or Grade 12 IB DP examination fees.

additional fees: school lunches, After School Activities, local field trips or additional extended field trips, graphic calculator or non-standard art fees.

school fees only to the maximum total amount of € \_\_\_\_\_.

Name of person authorising payment  
 Mr  Mrs

Phone	Email address for invoices
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Company Name

Street

Postal code	City	Country
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Additional information if required on invoice

<b>Section 4</b> <b>SIGNATURES</b>	<b>To be signed by persons making school payments: parents <u>OR</u> the employer authorising the payment <u>OR</u> a third party authorising the payment.</b>
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Parent 1 \_\_\_\_\_ Parent 2 \_\_\_\_\_ Date \_\_\_\_\_

**OR**

Company Stamp and Employer or third party authorisation signature \_\_\_\_\_ Date \_\_\_\_\_