



# PAYMENT METHODS FORM

## Payment by Monthly Direct Debit

This is the School's preferred payment method.

There is **no charge** for this facility which is only available to parents who have a UK Bank or Building Society.

1. The payment will be for the 'net fees' for the school year i.e. the normal school fees, less any scholarship or Bursary discount.
2. This sum will be collected by 10 equal monthly Direct Debit payments on the 1st working day of each month from the 1st August to 1st May each year.
3. In accordance with the Direct Debit guarantee, the School will provide you with a payment schedule.
4. Charges for lunches will be included in the Direct Debit Payment, 'Extras' will continue to be charged on the parents' normal termly invoice, to be paid before the start of each term.

If you wish to pay by monthly Direct Debit, please request a form from Oryna Bondar on 01253 774233 or email [billing@rossall.org.uk](mailto:billing@rossall.org.uk)

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## Payment by Cheque

All cheques payable to: **The Corporation of Rossall School**

*Please write in full the students name on the reverse of the cheque.*

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## Payment by Bank Transfer (*Cash payments are not accepted - please note the following points*)

Our full Bank Details are as follows :

Bank Name and Address:	National Westminster Bank, Victoria Square, Thornton-Cleveleys, Lancashire. ENGLAND
Account Name	The Corporation of Rossall School
Account Number	05008204
Sort Code	60-08-26
Swift Code	NWBKGB2L
IBAN Code	GB65NWBK60082605008204

*Please make sure that you quote the STUDENT'S NAME IN FULL on the transfer form*

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## Payment by Credit/Debit Card (*See overleaf*)

The section on the reverse of this form authorises payment.

Please note that school fees are strictly due to be paid, on or before the first day of term (monthly due date for Nursery), therefore this form must be received by/or before that date.

Please note we cannot accept payment via American Express or UnionPay.

## Payment by Credit / Debit Card

Student's name .....

I wish to pay my account by credit/debit card

Please tick the relevant sections

This term only £.....

Every term on or before the first day of term.....

### Nursery Only

This month only £.....

Every month on the due date .....

### My card number is

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### Expiry date of card

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### Security Code *(Last 3 digits on signature strip)*

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Name as on the card .....

Cardholder's address .....

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*\* NB UK addresses ONLY: Please ensure House Number and Postcode*

Signature..... Telephone.....

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Please return this form to:

Oryna Bondar

Rossall School, Broadway, Fleetwood FY7 8JW

*Telephone* +44 (0)1253 774233 | *Facsimile* +44 (0)1253 774279 | *Email* [billing@rossall.org.uk](mailto:billing@rossall.org.uk)