



Immaculate Conception School

3285 Cathedral Avenue, Prince George, BC, V2N 6R4 ■ Phone: 250-964-4362
Fax: 250-964-9465 ■ email: icsoffice@cispg.ca ■ www.icschool.ca

July 2, 2024

Dear Parents and/or Guardians,

We are asking that you fill out the form below indicating which option is your preferred choice for paying after-school care fees for the 2024-2025 school year. If you are new to our school or wish to change your payment information, please request the change at the office and we will send the appropriate form home for you to fill in and return.

Please note: Even though you may have filled out the forms in previous years, we need your signature each year to authorize the payments. Please note that this year, as per Canada Revenue Agency mandate, *we require your full legal name, including middle initial/s.* Please sign and date this form after choosing your preferred payment option for 2024-2025 year.

Thank you for your continued support of using our payment options!

	<p>Pre-authorized debit payments – you can register an account with the bookkeeper for automated monthly withdrawals at end of month. Fill out the <i>Payer’s Recurring Agreement</i> form and submit to the office or - Please use same Bank account as 2023-2024 School Year SIGNATURE _____ \$ _____ (or current rate) Date _____</p>
	<p>Recurring monthly credit card payments (Visa, MasterCard or Amex) – we can automatically bill your fees directly to your Visa or MasterCard at the end of month, on a recurring monthly basis. Fill out the <i>Payer’s Recurring Agreement</i> form and submit to the office or - Please use same card number as 2023-2024 School Year SIGNATURE _____ \$ _____ (or current rate) Date _____</p>

Any billing inquiries can be directed to the bookkeeper, Ms. Nadine Forseille, or by email to nforseille@cispg.ca.

Full Legal Name of Both 1:
Parents/Guardians including
middle initial 2:

Parent Email Address:

Student(s) Names &
Grade(s):

Signature: