



Fowler House Private School Fee Form 2024

**Please complete one form per family and return to the school via the teacher of your eldest child
or via email to fowlerhousefinance@gmail.com**

FULL NAME OF CHILD/CHILDREN AT FOWLER HOUSE SCHOOL	YEAR/AGE GROUP

Please complete details of Parents/Guardians responsible for the payment of the account.

1st Parent /Guardian	2nd Parent /Guardian
Name:	Name:
Surname:	Surname:
Postal Address:	Postal Address:
Residential Address:	Residential Address:
Email:	Email:
ID/Passport no:	ID/Passport no:

How would you like to be invoiced? Please indicate with a tick.

Monthly

 Annually

I have read and understood the contents of the form. In the event of any fee default on my part, I undertake to pay all interest charged as well as legal costs, including attorney and client costs.
I furthermore consent to the jurisdiction of the Windhoek Magistrates' Court.

1st Parent/Guardian	2nd Parent/Guardian
Full name:	Full name:
Date:	Date:
Signature:	Signature: