Temple Christian College

DIRECT DEBIT / CREDIT CARD REQUEST FORM

1. CUSTOMERS' AUTHORITY

Name of Customer(s) giving the Direct Debit/Credit Card Request

I/We _____ authorise and request

Name of Debit User: **TEMPLE CHRISTIAN COLLEGE INC.**

APCA User ID Number: **068187**

to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS).

2. DETAILS OF THE ACCOUNT TO BE DEBITED (choose either Bank Account or Credit Card)

☐ **BANK ACCOUNT** DETAILS

Name of the Financial Institution where account is held _____

Name(s) in which account is held _____

BSB number ☐☐☐ ☐☐☐

Account number _____

☐ **CREDIT CARD** DETAILS

Type of Credit Card (please circle): **Visa / MasterCard**

Name of card holder _____

Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry Date ☐☐ / ☐☐

3. PAYMENT DETAILS

I/We request that you debit my/our account in accordance with our Agreement:

Choice of frequency:

- ☐ **Weekly (44 weeks)** (Fridays for *Direct Debit* | Thursdays for *Credit Card*)
- ☐ **Fortnightly (22 fortnights)** (Fridays for *Direct Debit* | Thursdays for *Credit Card*)
- ☐ **Monthly (11 months)** on the 16th day of each month (January to November)
- ☐ **Termly (4 instalments)** on the second Friday of each term
- ☐ **Annually** on 7 February 2020
- ☐ **BUILDING FUND ONLY** *complete Part 4 (below)*

Preferred Start Date ☐☐ / ☐☐ / ☐☐☐☐

A payment schedule will be forwarded to you indicating the amount and date that payments will commence.

PLEASE NOTE: For Bank Account Direct Debits, if the due date for payment falls on a weekend or public holiday, the payment will be processed on the next business day unless advised.

4. BUILDING FUND CONTRIBUTIONS (Tax Deductible)

I wish to contribute ☐ **$60.00 per term** (to be deducted in the 2nd week of each term).

OR $ _____ **your nominated amount per term** (to be deducted in the 2nd week of each term).

This is a **separate** deduction towards the Building Fund and a receipt will be issued to you.

This Direct Debit agreement will remain in place for the duration of time you continue to have a debt with Temple Christian College or until it is stopped by yourself (7 days' notice in writing is required). The amounts to be deducted will be reviewed each year according to the level of school fees due. We will contact you at the beginning of each year to advise you of the new amount to be paid before any deductions are made.

Contact phone number _____

Email address _____

5. CUSTOMER(S) TO SIGN

I/We acknowledge that this Direct Debit arrangement is governed by the Terms and Conditions of the Temple Christian College Direct Debit Request Service Agreement and is to remain in force in accordance with the Terms and Conditions described in that Service Agreement.

Signature of Customer(s) _____ _____

Date ☐☐ / ☐☐ / ☐☐☐☐