DIRECT DEBIT REQUEST & PAYMENT ARRANGEMENT FORM

REIOICE IN SERVICE Est. 2003

YOUR DETAILS					REJOICE IN SERVICE
First name	Last name	Signature		Date	Est. 2003
Address			State	Postcode	Phone
STUDENT DETAIL	.S				
Student name	Year level	Student name			Year level
Student name	Year level	Student name			Year level
INSTALMENT OP	TIONS (PLEASE TI	CK)			
Payment amount will be the an	nount on the Annual Fee Stat	tement for the option	you have sele	ected.	
Annual: Payment in full due on	Statement Due Date	Monthly: 16th of	each month		
Termly: 4 payments: February/ Refer to Financial Information		Fortnightly Option Select a Thursday	y to start, then de	a Thursday eductions will be	
Commencement Date		fortnightly from t			
		Weekly: Weekly o	iii a Friday		
DAYMENT ORTIO	NG (DIEAGE TIOK)				
PAYMENT OPITO	NS (PLEASE TICK)				
DIRECT DEBIT	Please complete the Direct Debi	it Authorisation (below)			
CREDIT CARD	Please complete the Credit Card	d Authorisation (below)			
BPAY/EFT	As Per Biller Code/EFT Details or	n Annual Fee Statement			
OTHER	F	A the Access to Breat and			
OTHER	For other options please contac	it the Accounts Department			
DIRECT DEBIT A	UTHORISATION				
Name of Bank		Account Name			
BSB Number	Account Number				
CREDIT CARD AL	JTHORISATION				
Name on Card		Mastercard Visa			
Card Number				Expiry Da	ate /
					/

DECLARATION

I/We authorise Georgiana Molloy Anglican School to arrange for funds to be debited from my/our nominated bank account by Direct Debit or Credit Card for the payment of school fees and charges, in accordance with the terms described on our Direct Debit Service Agreement.

I/We acknowledge the Direct Debit payment arrangement will not cease and will continue automatically each year without the need to complete a new form. The school will automatically adjust the deduction amounts in February each year according to the calculations as per the Annual Fee Statement.

I/We acknowledge this may result in an increase or decrease to the repayment amounts each year.

Please note: Any cancellation to this agreement must be made in writing to accounts@gmas.wa.edu.au

First name	Last name	Signature	Date				
If debiting from a joint bank account, please complete the details for the second account holder:							
First name	Last name	Signature	Date				

Office use only:	Family ID	Statement Group	Amount	Entered	Document Manager

SERVICE AGREEMENT

DIRECT DEBIT REQUEST



- This document outlines our commitment to you, your rights and your responsibilities in respect of the Direct Debit Request (DDR) arrangements made between Georgiana Molloy Anglican School (GMAS), User ID 230367 and you.
- **2.** GMAS undertakes to periodically debit your nominated account for the purpose and amount specified in the DDR.
- **3.** Direct debits will occur on the nominated date or may occur up to two business days after the nominated date to allow for weekends or any unforeseen circumstances.
- **4.** GMAS will give you at least 14 days' written notice when changes to the initial terms of the arrangement are made. This notice will state any new amount, frequency, next direct debit date and any other changes to the initial terms.
- 5. It is your responsibility to ensure that your nominated account can accept direct debits (please check with your financial institution prior to entering into this agreement) and that there are sufficient cleared funds in your nominated account.
- **6.** If you wish to defer any payment or alter any of the details referred to in the DDR, please contact the Bookkeeper 48 hours prior to the next payment.
- **7.** If you wish to cancel your DDR arrangement, please contact the Bookkeeper in writing at least seven days prior to the next payment.

- **8.** You are required to advise GMAS if the nominated account is transferred or closed.
- 9. If your direct debit is returned or dishonoured by your financial institution, we will contact you to arrange an alternative payment. Any transaction fees payable by GMAS in respect of the above will be added to your fees account.
- 10. If your direct debits continue to be dishonoured, GMAS reserves the right to cancel your DDR arrangement, resulting in full payment of your account balance being requested.
- 11. Any queries concerning debit payments or disputed payments must be directed to GMAS in the first instance. These should be made at least seven working days prior to the next scheduled direct debit. All communication addressed to GMAS should include your account details.
- **12.** If you do not receive a satisfactory response from GMAS, you are able to lodge a dispute claim with your financial institution. You will receive a refund of the debited amount if GMAS cannot substantiate the reason for the debit.
- **13.** All personal customer information held by GMAS will be kept confidential except to the extent that disclosure is necessary in order to process debit payment, investigate and resolve disputed transactions or is otherwise required or permitted by law.

Please complete this form and return by post, email or in person. For enquiries please contact the GMAS Bookkeeper in person, via telephone, email or post.

Georgiana Molloy Anglican School PO Box 920, Busselton WA 6280 2 Hawker Approach, Yalyalup WA 6280

(08) 9752 5273

accounts@gmas.wa.edu.au