



Customer Details

First name	
Surname	
Address	
Billing email address	
Student 1 Name	
Student 2 Name	
Student 3 Name	

Direct Debit from Bank Account, Building Society or Credit Union

Name of financial institution	
Account name	
BSB number	
Account number	

Payment Schedule

Payment limit	Balance Due
Payment frequency	Fortnightly
Day of the week	Thursday
First payment date	21 st February 2019

Signature/s

I/We hereby authorise Canberra Girls Grammar School, ABN 67 008 559 331 (User ID 127948) to debited my/our nominated bank account according to the payment schedule specified above. This authorisation is to remain in force in accordance with this Direct Debit Request and the provided Direct Debit Service Agreement, and I/we have read and understood the same.

Name		Name	
Signature		Signature	
Date		Date	

If debiting a joint account, both signatories are required.



This agreement provides details of your obligations when undertaking a Direct Debit arrangement. It also provides our obligations to you and forms part of the terms and conditions of your Direct Debit request.

1. I/we understand that we can cancel, amend or dispute payment at any time, by contacting the Business Office at Canberra Girls Grammar School. I/we acknowledge that cancellation of this authority will not terminate my/our agreement with Canberra Girls Grammar School or remove my/our liability to make payments I/we have agreed to;
2. I/we acknowledge that it is our responsibility to ensure sufficient funds are available in the nominated bank account on the due date of payment;
3. Should the payment fall due on a non-business day, the payment will be initiated on the next available business day; and
4. I/we acknowledge that if a debit is returned as unpaid, Canberra Girls Grammar School may attempt to re-process any unsuccessful payments and/or any unsuccessful payment to future payment.

All information in this agreement will be treated with confidentiality and only used for the purposes for which they were obtained.