



Direct Debit Request Form After School Care / Holiday Program

Please return to: sac@cggs.act.edu.au

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	



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Signature/s

I/We hereby authorise Canberra Girls Grammar School, ABN 67 008 559 331 (User ID 127948) to debit 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.

Direct Debit Service Agreement

Terms and Conditions

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



2020 ELC Billing Schedule

Holiday Program Billing	Invoice Date	Direct Debit Date
06 January - 17 January	22 January 2020	23 January 2020
20 January - 31 January	05 February 2020	06 February 2020

ELC Billing Fortnight - Term 1	Invoice Date	Direct Debit Date
03 February - 14 February	19 February 2020	20 February 2020
17 February - 28 March	04 March 2020	05 March 2020
02 March - 13 March	18 March 2020	19 March 2020
15 March - 27 March	01 March 2020	02 April 2020
30 April - 10 April	15 April 2020	16 April 2020

Holiday Program Billing	Invoice Date	Direct Debit Date
13 April - 24 April	29 April 2020	30 April 2020

ELC Billing Fortnight - Term 2	Invoice Date	Direct Debit Date
27 April - 07 May	13 May 2020	14 May 2020
11 May - 22 May	27 May 2020	28 May 2020
25 May - 05 June	10 June 2020	11 June 2020
08 June - 19 June	24 June 2020	25 June 2020
22 June - 03 July (1 Week Holiday Care)	8 July 2020	9 July 2020

Holiday Program Billing	Invoice Date	Direct Debit Date
06 July - 17 July	22 July 2020	23 July 2020

ELC Billing Fortnight - Term 3	Invoice Date	Direct Debit Date
21 July - 31 July	05 August 2020	06 August 2020
03 August - 14 August	19 August 2020	20 August 2020
17 August - 28 August	02 September 2020	03 September 2020
31 September - 11 September	16 September 2020	17 September 2020
14 September - 25 September	30 September 2020	01 October 2020

Holiday Program Billing	Invoice Date	Direct Debit Date
28 September - 9 October	14 October 2020	15 October 2020

ELC Billing Fortnight - Term 4	Invoice Date	Direct Debit Date
12 October - 23 October	28 October 2020	29 October 2020
26 October - 06 November	11 November 2020	12 November 2020
9 November - 20 November	25 November 2020	26 November 2020
23 November - 04 December	9 December 2020	10 December 2020

Holiday Program Billing	Invoice Date	Direct Debit Date
7 December-18 December	16 December 2020	17 December 2020