

# Direct Debit (DDR) Request

(St Michael's, Kaleen)

## Customer's Authority

Name of customer/s giving the DDR

I/we
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APCA User ID Number

402726
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**Authorise and request the school until further notice in writing, to arrange for funds to be debited through the Bulk Electronic Clearing System (BECS) from my/our account at the Financial Institution identified below as instructed by me/us or any other amounts as instructed or authorised to be debited in accordance with the terms and conditions of the Direct Debit Request Service Agreement (DDRSA) as amended from time to time.**

## Payment Details

This authority allows the debiting of amounts payable by the Customer under the Agreement between the Customer and **St Michael's Primary**.

## Details of the Account to be debited

All details must be supplied

Name of the Financial Institution

Branch name

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Account name (please insert your name in full)

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BSB number

Account number

Family ID (school use)

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**Note:** Direct debiting is not available on the full range of accounts. If in doubt, please refer to your bank/financial institution.

## Amount

\$
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## Frequency

Week

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Month

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Fortnight

## Customer Authorisation

By signing below, I/We acknowledge that the Direct Debit arrangement is governed by the terms of Authorisation the DDRSA attached to this request. I/We also authorise the school to verify (if need be) the details of the account with my/our Financial Institution mentioned above and for that Financial Institution to release information to the school in order to allow it to verify the above account details.

If in joint names both signature may be required

Signature

Signature

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Date

Date

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