



you're in good hands

DIRECT DEBIT REQUEST – OSHC



Request and Authority to debit the account named below to pay Catholic Church Endowment Society Inc

Request and Authority to debit	Surname or company name _____ Given names or ACN/ARBN _____ (“you”) request and authorise Catholic Church Endowment Society Inc Debit User ID 113325 to arrange for any amount Catholic Church Endowment Society Inc may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below subject to the terms and conditions of the Direct Debit Request Service Agreement [and any further instructions provided below].
Insert the name and address of financial institution at which account is held	Financial institution name _____ Address _____
Insert details of account to be debited	Name of account (holder) _____ BSB number __ __ __ - __ __ __ Account number __ __ __ __ __ __ __ __ __
Acknowledgment	By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and Catholic Church Endowment Society Inc as set out in this Request and in your Direct Debit Request Service Agreement.
Payment Details	<input type="checkbox"/> The first debit may be made on ____/____/____ and at weekly / fortnightly / monthly / quarterly / half yearly / intervals after that <input type="checkbox"/> Payment Amount is to be \$ _____ and/or as amended in accordance with written instructions provided by you. <input type="checkbox"/> This authority will remain in place until: ____/____/____ (or) : Written request to cancel/suspend payments is provided by you. <p style="text-align: right;"><i>(please delete one of these options)</i></p>
Please Tick Insert your signature, address and Telephone No	<input type="checkbox"/> I have received and read a copy of the Direct Debit Service Agreement Signature _____ (If signing for a company, sign and print full name and capacity for signing eg. director) Address _____ _____ Date ____/____/____ Telephone No: _____ Child's Name _____

FOR MCC USE ONLY ↓

New Agreement / Amendment of Existing Authority No. _____

CDF Account Name **MOUNT CARMEL COLLEGE**

CDF Account Number: **2347S2**

Contact Person: Virginia Reimann
84470502

DEBTOR CODE: _____

OSHC BPAY REF NO: _____

OTHER INFO:

Date Loaded:
Loaded By:
Authority Number:



Direct Debit Request Service Agreement

Definitions

account means the account held at *your financial institution* from which we are authorised to arrange for funds to be debited.

agreement means this Direct Debit Request Service Agreement between *you* and *us*.

business day means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

debit day means the day that payment by *you* to *us* is due.

debit payment means a particular transaction where a debit is made.

direct debit request means the Direct Debit Request between *us* and *you* (and includes any Form PD-C approved for use in the *transitional period*).

transitional period means the period commencing on the industry implementation date for Direct Debit Requests (currently 31 March 2000) and concluding 12 calendar months from that date.

us or *we* means **Mount Carmel College** *you* have authorised by signing a *direct debit request*.

you means the customer who signed the *direct debit request*.

your financial institution is the financial institution where *you* hold the *account* that *you* have authorised *us* to arrange to debit.

1. Debiting your account

- 1.1 By signing a *direct debit request*, *you* have authorised *us* to arrange for funds to be debited from *your account*. *You* should refer to the *direct debit request* and this *agreement* for the terms of the arrangement between *us* and *you*.
- 1.2 We will only arrange for funds to be debited from *your account* as authorised in the *direct debit request*.
- 1.3 If the *debit day* falls on a day that is not a *business day*, we may direct *your financial institution* to debit *your account* on the previous *business day*.
If *you* are unsure about which day *your account* has or will be debited *you* should ask *your financial institution*.

2. Changes by us

- 2.1 We may vary any details of this *agreement* or a *direct debit request* at any time by giving *you* at least fourteen (14) days' written notice.

3. Changes by you

- 3.1 Subject to 3.2 and 3.3, *you* may change the arrangements under a *direct debit request* by contacting Mrs Virginia Reimann (08) 84470502 or Mr David Cotton (08) 84470525.
- 3.2 If *you* wish to stop or defer a *debit payment* *you* must notify *us* in writing at least 28 days before the next *debit day*. This notice should be given to *us* in the first instance.
- 3.3 *You* may also cancel *your* authority for *us* to debit *your* account at any time by giving *us* 7 days notice in writing before the next *debit day*. This notice should be given to *us* in the first instance.

4. Your obligations

- 4.1 It is *your* responsibility to ensure that there are sufficient clear funds available in *your* account to allow a *debit payment* to be made in accordance with the *direct debit request*.
- 4.2 If there are insufficient clear funds in *your* account to meet a *debit payment*:
 - (a) *you* may be charged a fee and/or interest by *your financial institution*;
 - (b) *you* may also incur fees or charges imposed or incurred by *us*; and
 - (c) *you* must arrange for the *debit payment* to be made by another method or arrange for sufficient clear funds to be in *your* account by an agreed time so that *we* can process the *debit payment*.
- 4.3 *You* should check *your* account statement to verify that the amounts debited from *your* account are correct
- 4.4 If National Australia Bank Limited A.C.N. 004 044 937 ("National") is liable to pay goods and services tax ("GST") on a supply made by the National in connection with this *agreement*, then *you* agree to pay the National on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5 Dispute	<p>5.1 If you believe that there has been an error in debiting <i>your account</i>, you should notify us directly on (08) 8210 8211 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.</p> <p>5.2 If we conclude as a result of our investigations that <i>your account</i> has been incorrectly debited we will respond to <i>your query</i> by arranging for <i>your financial institution</i> to adjust <i>your account</i> (including interest and charges) accordingly. We will also notify you in writing of the amount by which <i>your account</i> has been adjusted.</p> <p>5.3 If we conclude as a result of our investigations that <i>your account</i> has not been incorrectly debited we will respond to <i>your query</i> by providing you with reasons and any evidence for this finding.</p> <p>5.4 Any queries you may have about an error made in debiting <i>your account</i> should be directed to us in the first instance so that we can attempt to resolve the matter between us and you. If we cannot resolve the matter you can still refer it to <i>your financial institution</i> which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.</p>
6. Accounts	<p>You should check:</p> <ul style="list-style-type: none"> (a) with <i>your financial institution</i> whether direct debiting is available from <i>your account</i> as direct debiting is not available on all accounts offered by financial institutions. (b) <i>your account</i> details which you have provided to us are correct by checking them against a recent <i>account</i> statement; and (c) with <i>your financial institution</i> before completing the <i>direct debit request</i> if you have any queries about how to complete the <i>direct debit request</i>.
7. Confidentiality	<p>7.1 We will keep any information (including <i>your account</i> details) in <i>your direct debit request</i> confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.</p> <p>7.2 We will only disclose information that we have about you:</p> <ul style="list-style-type: none"> (a) to the extent specifically required by law; or (b) for the purposes of this <i>agreement</i> (including disclosing information in connection with any query or claim).
8. Notice	<p>8.1 If you wish to notify us in writing about anything relating to this <i>agreement</i>, you should write to :</p> <p style="text-align: center;">Mount Carmel College PO Box 35, Port Adelaide Business Centre SA 5015.</p> <p>8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the <i>direct debit request</i>.</p> <p>8.3 Any notice will be deemed to have been received two <i>business days</i> after it is posted.</p>