



ST MARY'S PRIMARY SCHOOL

McLennan Street, Mooroopna, Vic, 3629
Telephone (03) 5825 2858
office@smmooropna.catholic.edu.au

Direct Debit Request

Request and Authority to Debit the account named below to pay
St. Mary's School Mooroopna School Fees & Levies

I, We _____
Customer name(s) giving DDR

fee payer of _____
Student Name/s and Year Level

Authorise St. Mary's School (User ID 324013) to arrange through it's own Financial Institution, for funds to be debited from **my/our account**, through the Bulk Electronic Clearing System as described in The Schedule below.

Payment Details:

The payment is for Fees, Levies and charges. Identified by Family name/ Fee account number. _____

THE SCHEDULE

DETAILS OF ACCOUNT TO BE DEBITED

Account name _____

Name of Bank _____

Branch Name _____

BSB Number

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Account Number

(Please note direct debiting is not available on the full range of accounts. If in doubt, please refer to your Financial Institution.)

Amount \$ _____ **Frequency**

Weekly	
Fortnightly	

Monthly	
Quarterly	

Commencement Date _____
Refer to Schedule

DIRECT DEBIT REQUEST AUTHORISATION

I/we have read the "Service Agreement" overleaf and acknowledge and agree to same.
I/we request this Arrangement remain in force in accordance with The Schedule described above and in compliance with the "Service Agreement" overleaf.

Customer(s) Signature: _____ Date: _____

Customer(s) Signature: _____ Date: _____



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Credit Card Payment Request

Request and Authority to Debit the **Credit Card** listed & named below to pay
St. Mary's School Mooroopna School Fees & Levies

I, We _____
Customer name(s) giving DDR

fee payer of _____
Student Name/s and Year Level

Authorise St. Mary's School (User ID 324013) to arrange through it's own Financial Institution, for funds to be debited from **my/our Credit Card account**, through the Electronic Funds Clearing System as described in The Schedule below.

Payment Details:

The payment is for Fees, Levies and charges. Identified by Family name/ Fee account number. _____

THE SCHEDULE

DETAILS OF CREDIT CARD TO BE DEBITED

CARD Name _____

CARD Number

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CARD Expiry Date

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CSV Number

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(Please note direct debiting is not available on the full range of accounts. If in doubt, please refer to your Financial Institution.)

Amount \$ _____ **Frequency**

Weekly	
Fortnightly	

Monthly	
Quarterly	

Commencement Date _____
Refer to Schedule

Credit Card Payment REQUEST AUTHORISATION

I/we have read the "Service Agreement" overleaf and acknowledge and agree to same.
I/we request this Arrangement remain in force in accordance with The Schedule described above and in compliance with the "Service Agreement" overleaf.

Customer(s) Signature: _____ Date: _____

Customer(s) Signature: _____ Date: _____

DIRECT DEBIT / CREDIT CARD REQUEST SERVICE AGREEMENT

1. St. Mary's School, Mooroopna (Debit User) will initiate debit items in the manner referred to in The Schedule.
2. St. Mary's School (Debit User) will provide 14 days written notice if it proposes to vary details of this arrangement including, without limitation, the amount and frequency of payments. I/we may contact St. Mary's School about any proposed change before it takes place.
3. If I/we wish to defer, cancel any payment or alter any of the details referred to in The Schedule, I/we must contact St. Mary's School (Debit User).
4. In compliance with the Industry's Direct Debit Claim process, St. Mary's School will assist customers disputing any debit item drawn on the nominated BSB/account in The Schedule of this direct debit request. St. Mary's School will endeavor to resolve this matter within the agreed Industry timeframes. Customers can contact their bank should they be unable to resolve the issue and complete a "Direct Debit System Claim form" to initiate the process.
5. Direct debiting is not available on the full range of accounts of all financial institutions and I/we must check that the financial institution referred to in the first part of The Schedule will accept direct debits under this arrangement.
6. It is my/our responsibility to have sufficient clear funds available in the account to be debited when each payment is due to permit the payment of debit items of this request.
7. If payment falls due on any day which is not a business day, the payment will be made on the next business day.
8. If a debit item is returned unpaid, I/we may be charged a fee for each such item.
9. If I/we wish to cancel this Direct Debit Request or stop individual debit items from time to time, I/we must give St. Mary's School **seven day's notice**. Customers may cancel DDR through their bank.
10. St. Mary's School requests the customer to direct all enquiries, disputes or requests for payment change or cancellation to St. Mary's School (Debit User).
11. In the event that a debit item is initiated as the result of the fraud of the third party, I/we shall not be liable for the payment.
12. Except to the extent that disclosure is necessary in order to process debit items or as otherwise may be required by law, details of your accounts will remain confidential to St. Mary's School (Debit User).