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| **DIRECT DEBIT REQUEST** |

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|  |  |  |  |  |  |  |  |  |
| Child's Name |   |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |
| Family Details in Full |  |  |  |  |  |  |
| Mr/Mrs/Ms/Dr | Surname |  | First Name |  |  |  |
|   |  |   |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |
| Authorise and request **RK Operations Pty Ltd** (User ID no **497792** (“Debit User”), until further notice in writing, to arrange for my/our account (as described in the schedule below) to be debited as specified below, provided that if no amount is specified, the amount may be debited with any amounts which the Debit User may properly debit or charge me/us through the Direct Debit System:  |
|
| Account in the name/s of |  |  |  |  |  |  |
|   |   |   |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |
| Note: Direct Debit features are not available on the full range of bank accounts. If in doubt, please refer to your financial institution. |
|  |  |  |  |  |  |  |  |  |
| Financial Institution Name |  |  | Address (Optional) |  |  |
|   |   |   |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |
| BSB |  |  | Account Number |  |  |  |  |
|   |  |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |
| Direct Debit to commence on: |  | / | / |   |  |  |
|  |  |  |  |  |  |  |  |  |
| Frequency | Weekly / | FN / | Monthly | (Please circle) |  |  |
|  |  | Day | M / T / W / Th / F |  |  |  |  |
| (Office Use Only) |  Week | 1 or 2 |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Amount: |  | Amount owed |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| I/we have read the service agreement attached and agree to its terms. I/we authorise and request that this Direct Debit Request remain in force until cancelled, deferred or otherwise altered in accordance with the service agreement. I/we confirm account details are correct **and that this request is signed by required number of authorised signatories.** |
|  |  |  |  |  |  |  |  |  |
| Customers Signatures |  |  | Date |  |  |  |
|  |  |  |  |  |  |  |  |  |
|   |   |   |   |  |   |   |   |  |
|  |  |  |  |  |  |  |  |  |