

Direct Debit Request



SAVE THIS FORM TO YOUR COMPUTER AND
COMPLETE USING ADOBE® READER®

Please return the completed form via email to
finance@caseygrammar.vic.edu.au

Family Name	Account Number
Address	
Email Address	

Payment Frequency (please tick one) Quarterly Monthly Fortnightly Weekly

Please Note: All accounts are to be finalised by the date issued on the Fee Instalment Statement or Schedule of Fees issued with Arrangements, unless prior and mutually acceptable payment arrangements have been made with the Accounts Officer or Business Manager. This arrangement is for the current school year.

Authorisation to direct debit bank account / credit card

I/We _____

Authorise Casey Grammar School to:

1. Verify the details of my/our account as listed below with my/our financial institution.
2. Arrange through its own financial institution, a debit to your nominated account, which will not exceed the amount Casey Grammar School, has deemed payable by you.
3. This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.
4. Debit my School Fees account with a \$10 Administration Fee if my payment is dishonoured by my bank.

<input type="checkbox"/> Option 1 Cheque / Savings Account	Account Name	_____		
	Branch / BSB	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>	Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Option 2 Debit / Credit Card	Card Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	Expiry Date	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	CVV	<input type="text"/> <input type="text"/> <input type="text"/>
	Name on Card	_____		

Authorising Signatures on Account (joint accounts require both signatures)

By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangement between you and Casey Grammar School as set out in this Request and your Direct Debit Client Service Agreement.

Signature	Date
Signature	Date

CUSTOMER DIRECT DEBIT REQUEST SERVICE AGREEMENT

OUR COMMITMENT TO YOU

This document outlines our service commitment to you, in respect of the Direct Debit Request (DDR) arrangements made between Casey Grammar School and you. It sets out your rights, our commitment to you and your responsibilities to us together with where you should go for assistance.

Initial terms of the arrangement

In terms of the Direct Debit Request arrangements made between us and signed by you, we undertake to periodically debit your nominated account for the agreed amount for School Fees.

Direct Debit arrangements

- Direct Debit arrangements will occur as follows:
 - **Quarterly Payers** – the day BEFORE the first day of each Term
 - **Monthly Payers** – 28th of each month; January to October – 10 payments
 - **Fortnightly Payers** – commencing the last Friday in January for 20 payments
 - **Weekly Payers** – commencing the last Friday in January for 40 payments
- If any direct debit falls due on a non-business day or public holiday, it will be debited to your account on the next business day following the scheduled drawing date.
- We will give you at least 14 days' notice in writing when changes to the initial terms of the arrangement are made. This notice will state any other changes to the initial terms.
- If you wish to discuss any changes to the initial terms, please contact the Accounts Office on 03 5991 0800 or via email finance@caseygrammar.vic.edu.au

YOUR RIGHTS

Changes to the arrangement

If you wish to make changes to the direct debit arrangements, contact the Accounts Office on 03 5991 0800 or via email finance@caseygrammar.vic.edu.au

These changes may include:

- deferring the DDR; or
- altering the schedule; or
- stopping an individual debit; or
- suspending the DDR; or
- Cancelling the DDR completely.

Enquiries

Direct all enquiries to us, rather than to your financial institution. These should be made at least 5 working days prior to the next scheduled drawing date. All communication addressed to us should include your Surname and Account Number (if known).

All personal information held by us will be kept confidential except that information provided to our financial institution to initiate the drawing to your nominated account.

Disputes

If you believe that a direct debit has been initiated incorrectly, we encourage you to take the matter up directly with us by contacting the Accounts Officer on 03 5991 0800 between 9.00am and 4.30pm Monday to Friday or via email finance@caseygrammar.vic.edu.au.

Note: Your financial institution will ask you to contact us to resolve your disputed drawing prior to involving them.

YOUR COMMITMENT TO US

It is your responsibility to ensure that:

- your nominated account can accept direct debits (your financial institution can confirm this); and
- that on the direct debit date there is sufficient cleared funds in the nominated account; and
- That you advise us if the nominated account is transferred or closed.

If your direct debit is returned / dishonored by your financial institution, you will be contacted either by phone or via mail requesting payment for the returned /dishonored amount and a \$10 fee will be charged to your school account to recover costs.