



**Parklands**  
CHRISTIAN COLLEGE  
*Foundations for life*

## Direct Debit Request

Request and Authority to debit the account named below to pay Parklands Christian College

<b>DIRECT DEBIT REQUEST</b>	<input type="checkbox"/> Monthly	<input type="checkbox"/> Term	<input type="checkbox"/> Annual
<b>REQUEST AND AUTHORITY TO DEBIT</b>			
Your Surname or company name _____			
Your Given names or ABN/ARBN _____ "you"			
request and authorise <b>Parklands Christian College User Id 409238</b> to arrange, through its own financial institution, a debit to your nominated account any amount <b>Parklands Christian College</b> , has deemed payable by <i>you</i> !			
This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from <i>your</i> 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.			
<b>INSERT THE NAME AND ADDRESS OF FINANCIAL INSTITUTION AT WHICH ACCOUNT IS HELD</b>			
Financial institution name _____			
Address _____			
<b>INSERT DETAILS OF ACCOUNT TO BE DEBITED</b>			
Name/s on account _____			
BSB number (Must be 6 Digits)  __ __ __  -  __ __ __			
Account number  __ __ __ __ __ __ __ __ __ __			
<b>ACKNOWLEDGEMENT</b>			
By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Parklands Christian College as set out in this Request and in your Direct Debit Request Service Agreement.			
<b>INSERT YOUR SIGNATURE AND ADDRESS</b>			
Signature _____ Date ___ / ___ / ___			
(If signing for a company, sign and print full name and capacity for signing eg. director)			
Address _____			
<b>SECOND ACCOUNT SIGNATORY (IF REQUIRED)</b>			
Signature _____ Date ___ / ___ / ___			
(If signing for a company, sign and print full name and capacity for signing eg. director)			
Address _____			