



Payment Authority

Request and Authority to pay Cabra Dominican College as instructed below

| Requestor's Details | |
|--|-----------------------|
| Surname: | First Name: |
| Address: | Postcode: |
| Email: | |
| Telephone Contact (during business hours): | Family ID (If known): |

| Payment Details | |
|--|--|
| Amount | Note: If selecting the ongoing payment option below, the college will advise you of your fee payment amount each year to ensure the full year's fees are paid. |
| Choose Dates | Date of First Debit Date of Last Debit OR <input type="checkbox"/> Ongoing |
| Frequency – Debits to be made at the following intervals: | |
| Bank Account | <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly or <input type="checkbox"/> Monthly: <input type="checkbox"/> 3rd <input type="checkbox"/> 16th or <input type="checkbox"/> 26th |
| Credit Card | <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly or <input type="checkbox"/> Monthly: <input type="checkbox"/> 14th or <input type="checkbox"/> 28th |

Please complete either A or B

| A. Bank Account to be Debited | |
|---|--|
| 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"/> |
| Account Name (holder): | |

| B. Credit Card to be Debited | |
|---|-----------------------------|
| 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"/> | |
| Name on Card | Expiry Date CCV |
| Credit card payments will be automatically re-tried up to 3 x times (including the initial try). No fees are incurred. | |

| Request and Authority to Debit as Nominated Above | |
|---|------------------|
| <p>We request and authorise Cabra Dominican College User ID 214022 to debit or charge me/us through the Bulk Electronic Clearing System from an account held at the <i>financial institution</i> identified above subject to the terms and conditions of the <i>Payment Authority</i> Agreement. By signing this <i>Payment Authority</i>, I/we acknowledge having read and understood the terms and conditions governing the debit arrangements between us and Cabra Dominican College as set out in this request.</p> | |
| Name: | Name: |
| Date: | Date: |
| Signature: | Signature: |



Payment Authority 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 *Payment Authority* 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.
- *Payment Authority* means the *Payment Authority Agreement* between us and you.
- *us* or *we* means **Cabra Dominican College** you have authorised by signing a *Payment Authority request*.
- *you* means the customer who signed the *Payment Authority 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

By signing a *Payment Authority request*, you have authorised us to arrange for funds to be debited from your *account*. You should refer to the *Payment Authority* for the terms of the arrangement between us and you.

We will only arrange for funds to be debited from your *account* as authorised in the *Payment Authority*.

Or

We will only arrange for funds to be debited from your *account* if we have sent to the address nominated by you in the *Payment Authority*, a billing advice which specifies the amount payable by you to us and when it is due.

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

We may vary any details of this *Payment Authority* at any time by giving you at least fourteen (14) days written notice.

3. Changes by you

You may change the arrangements under a *Payment Authority* by contacting us at Cabra Dominican College, ph 8179 2400. If you wish to stop or defer a *debit payment* you must notify us in writing at least 7 days before the next *debit day*. This notice should be given to us in the first instance.

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

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 *Payment Authority*.

If there are insufficient clear funds in your *account* to meet a *debit payment*:

- you may be charged a fee and/or interest by your *financial institution*;
- you may also incur fees or charges imposed or incurred by us; and
- 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*.

You should check your *account* statement to verify that the amounts debited from your *account* are correct.

If **Cabra Dominican College** is liable to pay goods and services tax ("GST") on a supply made in connection with this agreement, then you agree to pay

Cabra Dominican College on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5. Dispute

If you believe that there has been an error in debiting your *account*, you should notify us directly at **Cabra Dominican College**, ph 8179 2400 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.

If we conclude as a result of our investigations that your *account* has been incorrectly debited we will respond to your query by arranging for your *financial institution* to adjust your *account* (including interest and charges) accordingly. We will also notify you in writing of the amount by which your *account* has been adjusted.

If we conclude as a result of our investigations that your *account* has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding.

Any queries you may have about an error made in debiting your *account* 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 your *financial institution* which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

6. Accounts

You should check:

- with your *financial institution* whether direct debiting is available from your *account* as direct debiting is not available on all accounts offered by financial institutions;
- your *account* details which you have provided to us are correct by checking them against a recent *account* statement; and
- with your *financial institution* before completing the *Payment Authority* if you have any queries about how to complete the *Payment Authority request*.

7. Confidentiality

We will keep any information (including your *account* details) in your *direct debit request* 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.

We will only disclose information that we have about you:

- to the extent specifically required by law; or
- for the purposes of this agreement (including disclosing information in connection with any query or claim).

8. Notice

If you wish to notify us in writing about anything relating to this agreement, you should write to **Cabra Dominican College Ltd**.

We will notify you by sending a notice to the address you have given us in the *Payment Authority*.

Any notice will be deemed to have been received two business days after it is sent.

Office Use Only

Request Received:

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Processed:

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Acknowledgement Sent:

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