



## FINANCE FORM - DIRECT DEBIT REQUEST

### INFORMATION

Request to authorise The Uniting Church in Australia Property Trust (Q.) (User ID: 362 257) represented by **The Lakes College. ABN 61 344 805 430** to arrange for funds to be debited from my/our nominated account or credit card facility at the financial institution shown below according to the schedule specified.

Please complete and return the form to Finance [finance@thelakes.qld.edu.au](mailto:finance@thelakes.qld.edu.au).

### PARENT DETAILS

Parent Code:

College School Fee Account Number

### REQUEST AND AUTHORITY TO DEBIT:

Full Name:

Email:

### FINANCIAL INSTITUTION

Name of Bank:

Branch Address:

#### OPTION 1: BANK ACCOUNT

Account Name:

BSB:

Account Number:

#### OPTION 2: CREDIT CARD

Account Name:

CC Number:

Expiry Date:

CW:

Card Type:

Mastercard

Visa

### PAYMENT DETAILS

Commencing Date:

Amount:

Weekly

Fortnightly

Monthly

Quarterly

### ACKNOWLEDGEMENT

By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and The Uniting Church in Australia Property Trust (Q.), as set out in this Request and in your Customer **DDR (Direct Debit Request) Service Agreement**. A fee of \$9.00 will be charged to your College fee account per any dishonour / rejection. (including an expired card). Any rejected or dishonoured transaction must be paid in full before the next scheduled direct debit.

The College reserves the right to increase or decrease your direct debit instalments to ensure that your account will be paid in full by the end of the academic year.

### SIGNATURE AND ADDRESS

Signature 1:

Signature 2:

(If signing for a company sign and print full name and capacity for signing eg. Director).

Postal Address: