

DIRECT DEBIT FORM - PAYMENT ARRANGEMENT

Name _____

Address _____ State _____ Postcode _____

Daytime Phone _____ Mobile _____

Student ID _____ Email _____

This Direct Debit Form relates to:	(Please indicate all relevant Amount)
Category	Amount
Rent	\$
College Tuition & Fees	\$
Other (Please specify)	\$
5% Deferred Premium Payment Fee	\$
Total	\$

I hereby direct Alphacrucis College Limited to operate my / our account by the following method until my Debt to Alphacrucis is finalised:

\$ _____ (_____)
(Amount in words)

Direct Debit – (once-off/weekly/fortnightly/monthly/one-time) commencing: ____ / ____ / ____

I authorise Alphacrucis to deduct this amount \$ _____ (weekly/fortnightly/monthly) from my/our specified account.

1. BANK ACCOUNT (please complete details below)

Name on the Account _____

Financial Institution's BSB _____

Account Number _____

Financial Institution's Name _____

Please note direct debiting is not available on the full range of accounts. If in doubt, please refer to your Financial Institution

2. CREDIT CARD DETAILS MASTERCARD BANKCARD VISA

Credit Card Number _____

Expiry Date ____ / ____ /

Cardholder's Name (please print) _____

Signed _____

DIRECT DEBIT REQUEST: Request to establish Debit Authority in the Direct Debit System.

I / We _____
(Surname or Company / Business Name) (Given name / CAN number)

Address _____ Postcode _____

Daytime Phone _____ Mobile Phone _____

Authorise ALPHACRUCIS – 107154 (APCA ID), until further notice in writing to arrange for funds to be debited from my/our account, at the Financial Institution identified and as described in the Schedule below, any amounts which Alphacrucis College Limited may debit or charge me / us through the Direct Debit System.

Direct Debit Application Service Agreement

By signing our Direct Debit Application Form, you acknowledge and agree to the following Terms and Conditions:

1. You authorise Alphacrucis College Limited, of 30 Cowper St, Parramatta NSW 2150 [ABN 13 072 747 187] to debit your nominated account or credit card in the manner specified in the Direct Debit Application.
2. We will provide you with at least fourteen (14) days prior notice in writing if we propose to vary any of the terms of the debit arrangement in place between us.
3. You will need to give us at least three (3) working days notice in writing if you wish to defer or alter any of the debit arrangements.
4. You will need to advise us in writing if you wish to stop or suspend a payment from being processed (a debit item) or cancel a Direct Debit Application. Such notice should be delivered to us at least three (3) working days before the due date for payment, or as otherwise stipulated in the Terms and Conditions.
5. If you wish to dispute any Debit item, you should refer to us in the first instance, and we will seek to resolve the matter with you. If we cannot resolve the dispute, you should contact your financial institution at which your nominated account is held. Your financial institution should then commence formal claims procedure on your behalf. Please direct all other queries in the first instance to the College.
6. Some financial institutions do not facilitate direct debits. If you are uncertain, you should check with your financial institution before signing a Direct Debit Application, to ensure that your nominated account is able to receive direct debits through the Bulk Electronic Clearing System.
7. Before completing a Direct Debit Application, you should check the details of your nominated account against a recent statement from your financial institution to ensure that your account details are correct.
8. You agree that it is your responsibility to have sufficient funds in your nominated account by the due date to enable payment to of debit items in accordance with the Direct Debit Application.
9. We will initiate a debit item on the due date stated in the Direct Debit Application or as otherwise agreed between us in writing. If the due date for payment falls on a day, which is not a business day in NSW, then the debit item will be processed on the next business day. You should enquire directly with your financial institution if you are uncertain as to when the debit item will be processed to your account.
10. If a debit item is returned unpaid by your financial institution, you authorise us to present a further debit for payment, notwithstanding that this may exceed the maximum amount stated in the Direct Debit application. We may ask you to reimburse us for any charges we incur as a result of your debit item being returned unpaid.
11. We will at all times endeavour to ensure the details of your personal records and account details held by us remain confidential. However, if you lodge a claim in relation to an alleged incorrect or wrongful debit, it may be necessary for us to release such information to your financial institution or its representative, or to our financial institution or its representative, to enable your claim to be assessed.

Direct Debit Request Authorisation

I / We have read the “Direct Debit Application Service Agreement” and acknowledge and agree with its terms and conditions.

I / We request this arrangement to remain in force in accordance with details set out in the Schedule described above and in compliance with the “Direct Debit Application Service Agreement”.

Customer(s) Name _____

Customer(s) Signature _____ Date _____

Please complete this form and email to accounts@ac.edu.au