Notre Dame COLLEGE

(03) 5822 8400

KNIGHT STREET CAMPUS
139 Knight Street
SHEPPARTON VIC 3630

EMMAUS CAMPUS
95 Grace Road
SHEPPARTON NORTH VIC 3631

finance@notredame.vic.edu.au
www.notredame.vic.edu.au

DIRECT DEBIT / CREDIT CARD INSTALMENT AUTHORISATION

Request and Authority to debit the account or credit card below to pay NOTRE DAME COLLEGE

DEBTOR DETAILS

Surname: _____ Given Name: _____

Postal Address: _____

PLEASE NOMINATE YOUR FREQUENCY AND COMMENCEMENT DATE BELOW

(commencement date to be a Friday for Weekly or Fortnightly, or the 15th of any month for monthly)

- ○ WEEKLY intervals, first debit commencing **FRIDAY** ____ /____ /_____
- ○ FORTNIGHTLY intervals, first debit commencing **FRIDAY** ____ /____ / _____
- ○ MONTHLY intervals, first debit commencing **15 /**____ /_____
- ○ QUARTERLY intervals on DUE DATE (as per statement)

PLEASE COMPLETE BELOW FOR EITHER CHEQUE/SAVINGS ACCOUNTS OR CREDIT CARD PAYMENTS

- **Cheque/Savings Accounts Details**

Financial institution name: _____ Branch: _____

Name of account: _____

BSB Number: _____ Account Number: _____

- **Credit Card Details**

For protection of your information, please contact Finance on 5822 8400 (Option 4) to advise Credit Card details.

INSTALMENT AMOUNT

In January each year you will receive written notification of the instalment amount based on your nominated instalment frequency. **Instalments are calculated to clear balances by 31 January the following year.** Changes throughout the year will be notified.

VOLUNTARY CONTRIBUTION TO BUILDING FUND

Do you wish to include the $200 Annual Voluntary Contribution to the Notre Dame College Building Fund when making your payment? (Please circle one) **YES** **NO**

ACKNOWLEDGMENT

By signing this Direct Debit/Credit Card Instalment Authorisation you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and Notre Dame College as set out in this Request and in your Direct Debit/Credit Card Instalment Service Agreement.

Signature: _____ Date: _____