

# **SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED (314011)**

# **Direct Debit Request (DDR)**

		 	 <b>\</b> —	٠,
ou may contact us as follo	ws			

Phone:	0246294	4800							
Email:	office@s	sherwoodhills.nsw.edu	ı.au						
Mail:	61 Jacai	randa Avenue							
	Bradbur	y, NSW, Australia	2560						
All communication address	ssed to us sho	ould include your Cust	omer Number.						
PART A - Your Detail	S								
Customer Number:									
Customer Name:									
Phone Number:									
Email Address:									
Address:									
	State:		Postcode:						
PART B - Schedule									
Payments will be debited Monthly, Quarterly, or Annually. Please indicate below your preference.  PART C - Payment Amounts									
Please choose <u>one</u> of the following three options of when you would like us to debit your account.									
Please Debit <b>HALF</b> the BI-MONTHLY invoice amount owing on:									
Or	·	ebruary to November)  Y invoice amount ow	ing on:						
Please Debit <b>TOTAL</b> the QUARTERLY invoice amount owing on:									
the 14th of the m	onths of Febru	uary, April, July & Oct	ober)						
Please Debit <b>TOTAL</b> th	ie ANNUAL in	voice amount owing o	n:						
the 14th of Febru	ıary.								
PLEASE NOTE: Any additional miscellaneous expenses, including but not limited to replacement items (e.g. diaries, stationery), uniforms, or text messages that are placed on account will be charged as a secondary direct debit payment on the scheduled payment date above.									



# PART D - Cheque/Savings Account or Credit Card Authorisation

□I/We request and authorise SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED (314011) to arrange, through its own financial institution, a debit to your nominated account any amount SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED (314011), has deemed payable by you. This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from your 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.

Financial Institution:															
Account Name:															
BSB No.				-											
Account Number:															
I/We request and authorise Acknowledgement. By signing and/or providing us with a valid instructionin respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED as set out in this Request and in your Direct Debit Request Service Agreement.															
Signature:									Date:						
Signature:									Date:						
	If de	ebiting	g fror	n a j	oint b	oank	acco	unt,	both si	ignat	tures	are	req	uired	
OR															
☐I request you SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED to arrange for funds to be debited from my nominated credit card according to the schedule specified above and attached Direct Debit Service Agreement.															
Credit Card Number:															
Expiry Date:	M	M	/	Υ	Υ										
Cardholder Name:															
Signature:									Date:						
Completed Application															
Return your completed application by email to: -															
Email:		offic	e@s	herw	/oodł	nills.r	nsw.e	edu.a	ıu						



# **Customer Direct Debit Request (DDR) Service Agreement**

This is your Direct Debit Service Agreement with SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED (314011)66 670 129 872 (the Debit User). It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider.

Please keep this agreement for future reference. It forms part of the terms and conditions of your *Direct Debit Request* (DDR) and should be read in conjunction with your DDR authorisation.

#### **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 Direct Debit Request Service Agreement between you and us.

**banking 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.

**Direct Debit Request** means the written, verbal or online request between *us* and *you* to debit funds from *your account*.

**us** or **we** means SHERWOOD HILLS CHRISTIAN SCHOOL LIMITED (314011), (the Debit User) you have authorised by requesting a *Direct Debit Request*.

you means the customer who has authorised the Direct Debit Request.

**your financial institution** means the financial institution at which *you* hold the *account you* have authorised *us* to debit.

## Debiting your account

By submitting a *Direct Debit Request*, you have authorised us to arrange for funds to be debited from your account. The *Direct Debit Request* and this agreement set out 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 *Direct Debit Request*.

#### or

We will only arrange for funds to be debited from *your account* if we have sent to the email / address nominated by *you* in the *Direct Debit Request*, 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 *banking day*, we may direct *your financial institution* to debit *your account* on the following *banking day*. If *you* are unsure about which day *your account* has or will be debited *you* should ask *your financial institution*.



## Amendments by us

We may vary any details of this Agreement or a Direct Debit Request at any time by giving you at least **fourteen (14)** days written notice sent to the preferred email or address you have given us in the Direct Debit Request.

# How to cancel or change direct debits

You can:

- (a) cancel or suspend the Direct Debit Request; or
- (b) change, stop or defer an individual debit payment

at any time by giving at least 7 days notice.

To do so, contact us at:

office@sherwoodhills.nsw.edu.au

or

by telephoning us on 0246294800 during business hours;

You can also contact your own financial institution, which must act promptly on your instructions.

#### 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 *Direct Debit Request*.

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

- (a) you may be charged a fee and/or interest by your financial institution;
- (b) we may charge you reasonable costs incurred by us on account of there being insufficient funds; and
- (c) 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



#### **Dispute**

If you believe that there has been an error in debiting your account, you should notify us directly on 0246294800 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. Alternatively, you can contact your financial institution for assistance.

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 in writing.

#### **Accounts**

You should check:

- (a) 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.
- (b) your account details which you have provided to us are correct by checking them against a recent account statement; and
- (c) with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

#### 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).

#### Contacting each other

If you wish to notify us in writing about anything relating to this agreement, you should write to:

Email: office@sherwoodhills.nsw.edu.au

Mail: 61 Jacaranda Avenue

Bradbury, NSW, Australia 2560

You may telephone us on 0246294800 during business hours.

All communication addressed to us should include your Customer Number.

We will notify you by sending a notice to the preferred address or email you have given us in the Direct Debit Request. Any notice will be deemed to have been received on the second banking day after sending.

Form updated as at: 13/10/2023