Coulter Swimming

Northmead Sports Centre Pty Ltd
201 Windsor Rd Northmead NSW 2152
86100856022

debitsuccess

Direct Debit Request **Authorisation Form**

Customer Details

Family ID (Office only):

Responsible Person Given Name:

Responsible Person Surname:

Address:

Suburb: State: Postcode:

Mobile Number: Alternate Phone Number:

Email:

Student Details

Child 1 Full Name:

Lesson Day/s:

Child 2 Full Name:

Lesson Day/s:

Child 3 Full Name:

Lesson Day/s:

Child 4 Full Name:

Lesson Day/s:

Child 5 Full Name:

Lesson Day/s:

See reverse for banking details

Office Use Only

Please tick once completed:
- ☐ All details are completed.
- ☐ Date of first lesson is correct.
- ☐ Current month fees have been paid.
- ☐ Customer has kept terms and conditions/cancellation form.

Form received by: Date: / /

Form processed by: Date: / /

Comments:

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Payment Details

Date of first lesson on Direct Debit (any outstanding fees from the current month must be paid at reception first): __ __ / __ __ / __ __

Payment frequency: Monthly (debited on 1st of each month and takes 1-3 business days to process)

Payment term: Continue until written notification from customer prior to the 25th day of the calendar month

Other Fees Payable

Joining Fee: $0

Cancellation Fee: $0

Default Fee: $12.50

Suspension Fee: $25 for 3-5 lessons

Bank Account Authorisation

Name of Financial Institution:

Account Holder Name:

BSB Number: Account Number:

I/We authorize DebitSuccess Pty Ltd, ACN 095 551 581, APCA User ID Number 496485 to debit my/our account at the Financial Institution identified here through the Bulk Electronic Clearing System (BECS). This authorization is to remain in force in accordance with the above terms and conditions and I/We have read and agree to be bound by these said terms and conditions.

Credit Card

Please charge my payments to my: ☐ Visa ☐ MasterCard

Card number: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Expiry Date: __ __ / __ __ Name on Card:

Legal Statement

I acknowledge that unless I provide written notification of termination of my membership prior to the 25th day of the calendar month, my membership fees will be deducted on the first day of the following calendar month and will not be refunded.

Authorising Signature

Date __ __ / __ __ / __ __

Signature

This Authorisation is to remain in force in accordance with the Terms and Conditions on this Direct Debit Request, the provided DDR Service Agreement, and I/we have read and understand the same.

Authorising Signature

Date __ __ / __ __ / __ __

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Please detach and keep for future reference.

Terms and Conditions

DEBITSUCCESS DIRECT DEBIT REQUEST (DDR) SERVICE AGREEMENT

This Agreement is designed to explain what your obligations are when undertaking a Direct Debit arrangement involving Debitsuccess. It also details what our obligations are to you and forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR Authorisation Form.

INITIAL TERMS

I/We authorise Debitsuccess Pty Limited (ACN: 095 551 581) APCA User ID 496485 to make periodic debits on behalf of the "Business" as indicated on DDR Authorisation Form (herein referred to as the Business).

I/We acknowledge that if specified by the Business, in addition to the agreed periodic debits set out in the DDR Authorisation Form, administration/setup, variation, reversal, dishonour, or processing fees may also apply and be debited under the DDR as instructed by the Business.

RELATIONSHIP

I/We acknowledge that Debitsuccess is acting as an agent of the Business and that Debitsuccess does not provide any goods or services, and has no express or implied liability in relation to the goods and services provided by the Business or the terms and conditions of any agreement with the Business.

CLEARED FUNDS

I/We acknowledge that is my/our responsibility to ensure that there are sufficient cleared funds in the nominated account by, and at all times on, the due date of the payment ("Day to Debit") to enable the direct debit to be honoured on the Day to Debit. I/We acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available when the debit is attempted, I/we agree that I/we will be responsible for any fees and charges that may be charged by my/our Financial Institution.

VARIATIONS TO DEBIT TERMS

I/We authorise the Business to vary the amount of the payments from time to time as provided for within the agreement with the Business. I/We authorise Debitsuccess to vary the amount of the payments upon instructions from the Business. I/We do not require Debitsuccess to notify me/us of such variations to the debit amount.

I/We acknowledge that variations to the debit arrangement will be directed to the Business.

I/We acknowledge that Debitsuccess/Business is to provide 14 days' notice if proposing to vary the terms of the debit arrangements otherwise than in accordance with an agreed payment schedule.

I/We acknowledge that my/our requests to vary, defer or stop the debit arrangement will be directed to the Business.

CANCELLING THESE DEBIT TERMS

I/We understand that I/we are able to cancel this DDR by requesting this of the Business or the Financial Institution, and I/we acknowledge that cancellation of the authority to debit my/our account will not terminate my/our agreement with the Business or remove my/our liability to make the payments I/we have agreed to.

DISHONOURED PAYMENTS

I/We acknowledge that:

-if a debit is returned by my/our Financial Institution as unpaid, I/we will be responsible for any fees and charges for each unsuccessful debit in addition to any Financial Institution charges and collection fees, including and not limited to any fees of solicitors and collection agents appointed by Debitsuccess; and

-Debitsuccess may attempt to re-process any unsuccessful payments as advised by the Business and/or add such unsuccessful payment to any future payments.

ACCURACY OF INFORMATION

I/We acknowledge that it is my/our responsibility to ensure that the details entered on the DDR Authorisation Form are correct and that Debitsuccess is not liable to the extent that any such details are wrong and this causes a required payment to be missed. In addition, where I/we are paying the required payments by credit card and have entered the details of the credit card on the DDR Authorisation Form, I/we agree that Debitsuccess may continue to debit from a credit card in accordance with the terms of this Agreement to the extent that the credit card has expired, and that it wholly my/our responsibility to provide details of a replacement credit card to Debitsuccess via the Business.

DISPUTES

I/We acknowledge that any disputed debit payments will be directed to the Business. If no resolution is forthcoming, I/we understand that I/we are to contact the Financial Institution.

OTHER AUTHORISATIONS

I/We authorise:

The Debit User to verify details of my/our account with my/our Financial Institution; and

The Financial Institution to release information allowing the Debit User to verify my/our account details.

INFORMATION SECURITY

Debitsuccess agrees that it will make reasonable efforts to keep any of your information contained in the DDR (including account details) and any other information that we have about you confidential and secure, and will 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.

Debitsuccess 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).

Should you have any queries in relation to these terms and conditions contact
DebitSuccess Pty Ltd.
PO Box 577, Mt Waverley, Vic, 3149
Phone: 1800 148 848 E-mail: customerservice@debitsuccess.com.

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Direct Debit Cancellation **Cancellation Form**

Customer Details

Family ID (Office only):

Responsible Person Given Name:

Responsible Person Surname:

Mobile Number: Alternate Phone Number:

Email:

Student Details

Child 1 Full Name:

Lesson Day/s:

Child 2 Full Name:

Lesson Day/s:

Child 3 Full Name:

Lesson Day/s:

Child 4 Full Name:

Lesson Day/s:

Child 5 Full Name:

Lesson Day/s:

Cancellation

Date of last lesson on Direct Debit: / /

Reason for cancellation:

Unless written notification of termination of membership is provided prior to the 25th day of the calendar month, membership fees will be deducted on the first day of the following month and will not be refunded.

Authorising Signature: Date: / /

Office Use Only

Form received by: Date: / / Processed:

Comments: