

## DIRECT DEBIT REQUEST - PLANNED GIVING

I/We Full Name(s):

Address:

Contact Phone Number:  Reference Number:

agree that the Diocesan Provident Fund ID Number 504844 may debit and/or charge any amount through the Bulk Electronic Clearing System (BECS), from the account nominated on this form. Each debit or charge must be effected according to the Direct Debit Request Service Agreement.

*For additional accounts from multiple financial institutions, please reprint this form.*

### NEW PAYMENT DETAILS - BANK ACCOUNT

#### Details of Financial Institution

Name:

Amount \$

Address:

Frequency:  Weekly  Fortnightly

#### Details of Account to be Debited

Account name:

BSB

Account No.

Monthly  Quarterly

One off

First payment date:

Final payment date:   
(optional)

### NEW PAYMENT DETAILS - CREDIT CARD

#### Details of Financial Institution

Name:

Amount \$

Address:

Frequency:  Weekly  Fortnightly

#### Details of Credit Card to be Debited

Account name:

Card Number:

Expiry Date:

CSV:

Monthly  Quarterly

One off

First payment date:

Final payment date:   
(optional)

### SUSPENSION

Final payment date:

Recommence payment on:

### CANCELLATION

Final payment amount: \$

Final payment date:

### SIGNATURE(S)

By signing and providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing debit arrangements between you and the Diocese of Wagga Wagga - St Michael's Cathedral Parish as set out in this Request and in your Direct Debit Request Service Agreement. If debiting a joint account that requires 2 signatures to authorise payments, please have 2 account holders sign. If you are signing for and on behalf of an entity, please state the capacity in which you sign, in the signature box below.

Signature:

Signature:

Date:

Date:

Office Use Only DPF Authority no:

Client Account No:

## Direct Debit Request Service Agreement

### 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, including the direct debit request

**Business day means** a day other than a Saturday or a Sunday or a listed public holiday *Debit day* means the day that payment is due

**Debit payment means** a particular transaction where a debit is made, according to your direct debit request

**Direct debit request means** the Direct Debit Request between us and you *Us* and *we* and *our* means the Diocesan Provident Fund.

**Us or we means** the Diocese of Wagga Wagga - St Michael's Cathedral Parish (the debit User) you have authorised by requesting a Direct Debit Request.

**You means** the customer(s) who signed the direct debit request.

**Your financial institution** is the financial institution where you hold the account that you have authorised us to arrange to debit

### 1. Debiting your account.

By signing a *direct debit request*, you have authorised us to arrange for funds to be debited from *your account* according to the *agreement* we have with you.

We will only arrange for funds to be debited from your account as authorised in the *direct debit request*;

If the *debit day* falls on a day that is not a business day, we may direct your *financial institution* to debit *your account* on the following or previous *business day*. If you are unsure about which day *your account* has or will be debited, please check with *your financial institution*.

### 2. Amendments by you

You may change, stop or defer a debit payment, or terminate (Cancel) this agreement at any time by providing us *with* at least 14 days written notice to the address stated in Section 8 of this Agreement.

### 3. 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.

If there are insufficient clear funds available in *your account* to meet a *debit payment*:

- *you* or *your account* may be charged a fee and/or interest by your *financial institution*;
- *you* or *your account* may be charged a fee to reimburse *us* for charges *we* have incurred for the failed transaction;
- Please check *your account* statement to verify that the amounts debited from *your account* are correct. We will not issue individual confirmation of payments made.

### 4. Our Obligations

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

### 5. Dispute

If *you* believe that there has been an error in debiting *your account* you should call *us* on 6921 2164 and confirm the details in writing with *us* as soon as possible so that *we* can resolve *your* query quickly. Alternatively you can take it up directly with your financial institution.

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 investigation that your account has not been incorrectly debited we will respond to your query by providing you with the reasons and any evidence for this finding in writing.

### 6. Accounts

You should check;

- with *your financial institution* whether direct debiting is available from *your accounts* offered by financial institutions.
- *your account* details which *you* have provided to *us* are correct by checking them against a recent *account* statement; and
- with *your financial institution* before completing the *direct debit request* if *you* have any queries about how to complete the *direct debit request*.

### 7. 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. The Bank may require such information to be provided in the event of a claim or relating to an alleged incorrect or wrongful debit.

### 8. Notice

If you wish to notify us in writing about anything relating to this agreement, you should write to: Cnr Church & Johnston Street, Wagga Wagga. We may send notices either electronically to your email address or by ordinary post to the address you have given us. If sent by mail, communications are taken to be received on the day they would be received in the ordinary course of post.