

DIRECT DEBIT AUTHORITY

To West Arana Hills Rugby League Football Club

ABN: 56 682 500 132

From **Parent First Name/s** **Parent Family Name**

Players One Name
Team
Parent Mobile Number:

Players Two Name
Team
Parent Mobile Number:

Players Three Name
Team
Parent Mobile Number:

Debit/Credit Card

Full Name on Card & Account Number **Type of Card**
 Visa
 Mastercard

Card Number **CVV (3 digits on back of card)**

Expiry Date

Request and Authority to Debit I/We request and authorise Bank of Queensland to debit, through the Bulk Electronic Clearing System, my/our Nominated Account with:

\$ _____ each Week Fortnight

With the first drawing / / 2019
 To be made on – Date

Until Full fees have been paid

OFFICE USE ONLY	Date	Amount	Balance Remaining

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Acknowledgement Subject to the Terms & Conditions of the Direct Debit Request Service Agreement. by signing this Direct Debit Request, I/we acknowledge having read and understood the terms and conditions governing the debit arrangements between me/us and you as set out in this Request and in/our Direct Debit Request Service Agreement.

Signed by: If the Nominated Account is joint account, all signatories to that account must sign
If the Nominated Account is company account, sign and print full name and capacity for signing (e.g Director) below.

Signature 1

Signature 2

Name

Name

Address

Address

Capacity (Companies only)

Capacity (Companies only)

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Direct Debit Request (DDR)

TERMS AND CONDITIONS

Service Agreement

By Signing our Direct Debit Request you acknowledge and agree to the following terms and conditions:

- ✓ You authorise *West Arana Hills Rugby League Football Club Inc* ABN: 56 682 500 132 Bank of Queensland Direct Debit User ID <Insert> (herein referred to as “WAHRLFC”) to make periodic debits on behalf of the “Club” as indicated on the attached Direct Debit Request.
- ✓ I/We acknowledge that the debit amount will be debited from my/our account according to the terms and conditions of my/our agreement with the Club and the terms and conditions of Direct Debit Request and this DDR Service Agreement.
- ✓ I/We acknowledge that the bank account and/or credit card details have been verified against a recent bank statement to ensure accuracy of the details provided and I/we will contact my/our financial institution if I/we are uncertain of the accuracy of these details.
- ✓ I/We acknowledge that it is my/our responsibility to ensure that there are sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honoured on the debit date. Direct debits normally occur overnight, however transactions can take up to three (3) business days depending on the financial institution. Accordingly, 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, I/we agree that WAHRLFC will not be held responsible for any fees and charges that may be charged by either my/our or its financial institution.
- ✓ I/We acknowledge that default of arranged debit MAY result in the immediate suspension of my ‘registered player/s’ with WAHRLFC until subsequent arrangements are made and the defaulted payment rectified.
- ✓ I/We acknowledge that if a debit is returned by my/our financial institution as unpaid, a failed payment fee may be payable by me/our financial institution for each unsuccessful debit attempt together with any collection fees, including but not limited to any solicitor fees and/or collection agent fee as may be incurred by WAHRLFC.
- ✓ I/We authorise WAHRLFC to attempt to re-process any unsuccessful payments.
- ✓ I/We acknowledge that there may be a delay in processing the debit if:
 - there is a public or bank holiday on the day of the debit, or any day after the debit date;
 - a payment request is received by WAHRLFC on day that is not a business day in Queensland;
 - a payment request is received after normal business hours Monday to Friday.

Any payments that fall due on any of the above will be processed on the next business day. Please contact your financial institution if you are unsure when the debit will be processed.

Initials _____

To Change, stop or defer a payment

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ABN: 56 682 500 132

- ✓ I/We acknowledge that I/we will contact the WAHRLFC if I/we wish to alter or defer any of the debit arrangements. Requests will be in writing at least five (5) business days BEFORE the next scheduled debit date. The Financial Institution can also be advised. If the Financial Institution is advised, I/we agree to also advise West Arana Hills RLFC in writing to arana.panthers@bigpond.com
- ✓ I/We acknowledge that any request by me/us to stop or cancel the debit arrangements will be directed to the West Arana Hills RLFC. The Financial Institution can also be advised. If the Financial Institution is advised, I/we agree to also advise West Arana Hills RLFC in writing at least five (5) business days BEFORE the next scheduled debit date to arana.panthers@bigpond.com
- ✓ I/We acknowledge that any disputed debit payments will be directed to the West Arana Hills RLFC. If no resolution is forthcoming, I/We agree to contact my/our financial institution.

Credit Card Payments

- ✓ I/We acknowledge that “WAHRLFC” will appear as the merchant for all payments from my/our credit card.
- ✓ I/We acknowledge that Credit Card Fees are a minimum of the Transaction Fee or the Credit Card Fee, whichever is greater as detailed on the Direct Debit Request.

Privacy

- ✓ I/We appoint WAHRLFC as my/our exclusive agent with regard to the control, management and protection of my/our personal information (relating to the West Arana Hills RLFC and contained in this DDR Service Agreement). I/We irrevocably authorise WAHRLFC to take all necessary action (which WAHRLFC deems necessary) to protect and/or correct, if required, my/our personal information, including (but not limited to) correct account numbers.
- ✓ Other than as proved in the Agreement, WAHRLFC will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made relating to an alleged incorrect or wrongful debit, to be referred to a debt collection agency for the purposes of debt collection, or as otherwise required or permitted by law.
- ✓ I/We authorise:
 - WAHRLFC to verify and/or correct, if necessary, details of my/our account with my/our financial institution; and
 - my/our financial institution to release information allowing WAHRLFC to verify my/our account details.
- ✓ I/We acknowledge that WAHRLFC is to provide at least 14 days' notice if it proposes to vary any of the terms and conditions of the Direct Debit Request or this DDR Service Agreement including varying any of the terms of the debit arrangements between us.

Initials _____