

# COLLEGE PAYMENT OF FEES AND DIRECT DEBIT REQUEST AUTHORITY

OFFICE USE ONLY	
Charges this year:	_____
Balance b/f:	_____
	(arrears or credit)
Total payable:	_____
Weekly/Monthly Pmt: (44/10)	_____
Credit card surcharge: (if applicable)	_____
Total (incl. surcharge):	_____
D/T Updated	<input type="checkbox"/>
Emailed a/c details	<input type="checkbox"/>

**ALL FAMILIES ARE REQUIRED TO COMPLETE THIS FORM AND RETURN IT TO CHEVALIER COLLEGE**

This authority is to remain in force for each year of the student's enrolment at the College, unless the College receives alternative written instructions from the fee payer.

Please return via one of the following methods:

- mail: PO Box 243, Bowral NSW 2576  
 email: [schoolfees@chevalier.nsw.edu.au](mailto:schoolfees@chevalier.nsw.edu.au)  
 hand: Accounts Office, 11 Charlotte Street, Burradoo

Family Details	Family Account Surname _____ Family Code _____
	Student name/s _____
Method of payment	Please ✓ one option
	<input type="checkbox"/> 1. <b>Full payment upfront</b> by no later than the third Friday of February (Discounted Annual Tuition Fee) by: <input type="radio"/> Cash / Cheque / Credit Card <input type="radio"/> Online Payment Portal (located on the College Website)
	<input type="checkbox"/> 2. <b>Weekly or Monthly Direct Debit Authority</b> (please complete the reverse side of this form)
	<input type="checkbox"/> 3. <b>Other arrangement</b> already approved by the Business Manager
Name and signature	Name _____
	Address _____
	Signature _____ Date _____

## DIRECT DEBIT REQUEST AUTHORITY

**ONLY COMPLETE THIS SIDE IF YOU HAVE SELECTED A DIRECT DEBIT OPTION**

**NOTE:** Please be aware that any outstanding balance from previous years of less than \$500, will be automatically included in your direct debit payments.

Request and authority to debit	<p>Given Names or Company's ACN/ABN _____</p> <p>Surname or Company Name _____</p> <p>Request and authorise <i>CHEVALIER COLLEGE</i>, Debit User Identification Number 207093, to arrange through its own financial institution for any amount <i>CHEVALIER COLLEGE</i> may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below and paid to the debit user, subject to the terms and conditions of the Direct Debit Request Service Agreement and any further instructions provided below.</p>
--------------------------------	---

Name and address of the financial institution at which the account is held	<p>Financial Institution Name _____</p> <p>Address _____</p> <p>_____</p>
--	---

Details of the account to be debited	<p style="text-align: center; background-color: black; color: white; padding: 2px;"><b>CHOOSE ONE ACCOUNT ONLY</b></p> <p><b>BANK ACCOUNT</b></p> <p>Name of Account _____</p> <p>BSB Number _____</p> <p>Account Number _____</p> <p style="text-align: center;"><b>OR</b></p> <p><b>CREDIT CARD DETAILS</b> (please indicate card type)    <input type="radio"/> Amex    <input type="radio"/> Visa    <input type="radio"/> MasterCard</p> <p><i>Note: No Surcharge applies to credit card direct debit payments</i></p> <p>Credit Card Number <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 150px; height: 20px;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>Name on the Card _____ Expiry Date _____</p>																				

Payment Frequency	<p><b>Direct Debiting of College Fees</b></p> <p><input type="checkbox"/> WEEKLY – 44 payments, commencing on the first Friday in Term 1</p> <p><input type="checkbox"/> MONTHLY – 10 payments, on the 15<sup>th</sup> of each month (February – November inclusive)</p>
-------------------	--

Acknowledgement & Authorisation	<p>I/We authorise <i>CHEVALIER COLLEGE</i> ABN 21 328 709 826 to debit the stated account. By signing this payment authority I/we acknowledge having read and understood the terms and conditions governing the arrangement between myself/ourselves and Chevalier College as set out in this payment authority and in the Direct Debit Service Agreement. This authority is to remain in force for the above payment frequency.</p>
---------------------------------	--

Name and signature	<p>Name _____</p> <p>Signature _____ Date _____</p>
--------------------	---

## DIRECT DEBIT REQUEST SERVICE AGREEMENT

The following is your Direct Debit Service Agreement with Chevalier College ABN 21 328 709 826. The agreement is designed to explain 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.

We recommend you keep this agreement in a safe place 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 form.

<b>Definitions</b>	<p><b>account</b> means the account held at your <i>financial institution</i> from which we are authorised to arrange for funds to be debited</p> <p><b>agreement</b> means this Direct Debit Request Service Agreement between <i>you</i> and <i>us</i></p> <p><b>banking day</b> means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia</p> <p><b>debit day</b> means the day that payment by <i>you</i> to <i>us</i> is due</p> <p><b>debit payment</b> means a particular transaction where a debit is made</p> <p><b>direct debit request</b> means the Direct Debit Request between <i>us</i> and <i>you</i></p> <p><b>us or we</b> means <b>Chevalier College</b> (the Debit User) <i>you</i> have authorised by signing a <i>Direct Debit Request</i></p> <p><b>you</b> means the customer who has signed or authorised by other means the <i>Direct Debit Request</i></p> <p><b>your financial institution</b> means the financial institution nominated by <i>you</i> on the DDR at which the <i>account</i> is maintained.</p>
--------------------	--

### 1. Debiting your account

- 1.1. By signing a *Direct Debit Request* or by providing *us* with a valid instruction, *you* have authorised *us* to arrange for funds to be debited from *your account*. *You* should refer to the *Direct Debit Request* and this *agreement* for the terms of the arrangement between *us* and *you*.
- 1.2. We will only arrange for funds to be debited from *your account* as authorised in the *Direct Debit Request*.
- 1.3. If the *bank account 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*.
- 1.4. If the *credit card debit day* falls due on a *Saturday* or a *Sunday* or a *public holiday listed throughout Australia*, we may direct *your financial institution* to debit *your credit card* on the *actual due date*.

### 2. Amendments by us

- 2.1. We may vary any details of this *agreement* or a *Direct Debit Request* at any time by giving *you* at least thirty (30) days written notice.

### 3. Amendments by you

*You* may change, stop or defer a debit payment or terminate this agreement by providing *us* with at least five (5) **business days** notification in writing to:  
 Chevalier College, PO Box 243 Bowral NSW 2576; **OR**  
 download and complete the **Alteration to Direct Debit Authority** located on the College's website; **OR**  
 contact *us* on 02 4861 1488 during business hours.

### 4. Your obligations

- 4.1. 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*.
- 4.2. 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) *you* will incur an administration fee imposed by *us* as per the Fees Schedule
  - (c) *you* must arrange for the debit payment to be made on another day or caught up.
- 4.3. *You* should check *your account* statement to verify that the amounts debited from *your account* are correct.

### 5. Dispute

- 5.1. If *you* believe that there has been an error in debiting *your account*, *you* should notify *us* directly on phone number 02 4861 1488 and confirm that notice in writing with *us* as soon as possible so that we can resolve your query without delay.
- 5.2. 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.
- 5.3. 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.

### 6. 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.

### 7. Confidentiality

*The College* will at all times ensure the details of each client will remain confidential and released only to the *College's* or *client's* institution.

### 8. Notice

- 8.1. If *you* wish to notify *us* in writing about anything relating to this *agreement*, *you* should write to:  
 Chevalier College, PO Box 243 Bowral NSW 2576
- 8.2. We will notify *you* by sending a notice in the ordinary post to the address *you* have given *us* in the *Direct Debit Request*.
- 8.3. Any notice will be deemed to have been received on the third *banking day* after posting.