



DIRECT DEBIT REQUEST

CHILD'S NAME: _____

PLEASE SELECT THE SERVICE YOU ARE AUTHORISING THIS DIRECT DEBIT REQUEST FOR

- Brunswick** – 282 Victoria Street
- Lovely Banks** – 405 Anakie Road
- Annadale** – 3 Enderby Drive

REQUEST AND AUTHORITY TO DEBIT	<p>Your Surname or company name _____</p> <p>Your given names or ABN/ARBN _____ "you"</p> <p>Request and authorise HAPPY HIPPO KINDERGARTEN AND CHILDCARE PTY LTD to arrange, through its own financial institution a debit to your nominated account any amount HAPPY HIPPO KINDERGARTEN AND CHILDCARE PTY LTD, has deemed payable by <i>you</i>.</p> <p>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.</p>
NAME AND ADDRESS OF FINANCIAL INSTITUTION AT WHICH ACCOUNT IS HELD	<p>Financial institution name _____</p> <p>Address _____</p> <p>_____</p>
DETAILS OF ACCOUNT TO BE DEBITED	<p><u>DIRECT DEBIT DETAILS</u></p> <p>Name/s on account _____</p> <p>BSB number (Must be 6 digits) ____ - ____</p> <p>Account number _____</p>
ACKNOWLEDGEMENT	<p>By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you acknowledge:</p> <p>You have understood and agreed to the terms and conditions governing the debit arrangements between you and Happy Hippo Kindergarten and Childcare, as set out in this Request, your Direct Debit Request Service Agreement, and the Service Handbook.</p> <p>You authorise and request that this Direct Debit Request remain in force until cancelled, deferred or otherwise altered in accordance with the Service Agreement; and</p> <p>You confirm account details are correct and that this request is signed by required number of authorised signatories.</p>
YOUR SIGNATURE AND ADDRESS	<p>Signature _____</p>

	<p>(If signing for a company, sign and print full name and capacity for signing e.g. director)</p> <p>Address _____</p> <p>_____</p> <p>Date __ / __ / ____</p>
<p>SECOND ACCOUNT SIGNATORY (IF REQUIRED)</p>	<p>Signature _____</p> <p>(If signing for a company, sign and print full name and capacity for signing e.g. director)</p> <p>Address _____</p> <p>Date _____</p>