



## Direct Debit Notification

### Education (School) Fees

**BSB 064-430 Account 00090200**

**Please use student's name or EQ ID as payment reference/description**

**Your details:**

<b>PARENT/CAREGIVER NAME:</b>					
<b>Student(s) Name(s)</b> (Payment reference/description)					
<b>Commencement Date</b>					
<b>Amount</b>	\$				
<b>Frequency</b>	Weekly		Fortnightly		Monthly
<b>Deductions Approved For:</b>	Student resource scheme fees				

I will continue payment until:

- TARGET amount of: \$\_\_\_\_\_ is reached, **OR**
- ...../...../..... date is reached **OR**;
- Continue until cancelled.
- I agree to complete payment for all monies owing, using the Direct Debit payment method.

<b>Customer Signature:</b>	
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<b>Date:</b>	
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