

ABN: 17 349 353 404 PH: 1800 827 234
DIRECT DEBIT REQUEST - NEW CUSTOMER

Business:	Husrtbridge Primary	ABN/ACN:	86530420773
*Surname:		*First Name:	
*Mobile Phone:		Customer Reference:	
*Email:			
*Address:			

* indicates a mandatory field.

Debit Arrangement / Payment Details

I authorise and request NumeroPro Pty Ltd ATF The Kidsoft Unit Trust (Direct Debit User ID: 424700) to debit payments from my nominated account, as specified below, at intervals and amounts as directed by Husrtbridge Primary in accordance with the Terms and Conditions of this agreement.

Child's Name	Fixed Amount	Fixed	Variable
		<input type="checkbox"/>	<input type="checkbox"/>
Fee Start Date	Weekly	Fortnightly	Monthly
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			4 Weekly
			<input type="checkbox"/>

Debit from Credit Card

<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard
Card Number:	
Expiry Date:	Card Holder's Name:

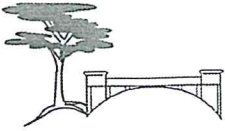
By Signing this form, I/we authorise NumeroPro Pty Ltd ATF The Kidsoft Unit Trust, acting on behalf of the Business, to debit payments from my specified credit card above, and I/we acknowledge that NumeroPro Pty Ltd ATF The Kidsoft Unit Trust will appear as the business name on my credit card statement. Furthermore, I/we agree to reimburse NumeroPro Pty Ltd ATF The Kidsoft Unit Trust for any successful claims made by the Card Holder through their financial institution against NumeroPro Pty Ltd ATF The Kidsoft Unit Trust

This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request, the provided NumeroPro Pty Ltd ATF The Kidsoft Unit Trust DDR Service Agreement, and I/we have read and understood the same.

Signature(s) of Nominated Account Holder/Credit Card Holder

Date

Office Use Only	Received Date:	Reference No:	Ver 1.0	COMPLETE USING BLACK INK ONLY
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*Surname:		*First Name:	
*Mobile Phone:		Customer Reference:	
*Email:			
*Address:			

* indicates a mandatory field.

Debit Arrangement / Payment Details

I authorise and request NumeroPro Pty Ltd ATF The Kidsoft Unit Trust (Direct Debit User ID: 424700) to debit payments from my nominated account through the Bulk Electronic Clearing System (BECS), as specified below, at intervals and amounts as directed by Husrtridge Primary in accordance with the Terms and Conditions of this agreement.

Child's Name	Fixed Amount	Fixed	Variable
		<input type="checkbox"/>	<input type="checkbox"/>
Fee Start Date	Weekly	Fortnightly	Monthly
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			4 Weekly
			<input type="checkbox"/>

Debit from Bank, Building Society or Credit Union Account

Financial Institution:		Branch:	
BSB Number:			
Account Number:			
Account Holder Name(s):			

I/We authorise NumeroPro Pty Ltd ATF The Kidsoft Unit Trust ABN 17 349 353 404 to debit my/our account at the Financial Institution identified above through the Bulk Clearing System (BECS) in accordance with the Payment details stated above and as per the NumeroPro Pty Ltd ATF The Kidsoft Unit Trust DDR Service Agreement (Ver 3.0) provided.

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and NumeroPro Pty Ltd ATF The Kidsoft Unit Trust as set out in this Request and in your Direct Debit Request Service Agreement.

Signature(s) of Nominated Account Holder

	Date
	Date

Office Use Only	Received Date:	Reference No:	Ver 1.0	COMPLETE USING BLACK INK ONLY
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