



# Queen of Peace Primary School

## Direct Debit Request (DDR)

### Authority to Debit

Parent/Guardian Surname/Family Name \_\_\_\_\_ Parent/Guardian First Name \_\_\_\_\_

Family ID # \_\_\_\_\_ (As found on your statement/invoice)

Eldest Child's Name \_\_\_\_\_ Class e.g. 6A \_\_\_\_\_

Child 2 \_\_\_\_\_ Class \_\_\_\_\_

Child 3 \_\_\_\_\_ Class \_\_\_\_\_

Child 4 \_\_\_\_\_ Class \_\_\_\_\_

Charge 100% to below *For families with split fee arrangements, please ensure each party submits a separate form nominating %*

#### Nominated Financial Details - Credit Card

Name appearing on the card \_\_\_\_\_

Card type (please tick)  Visa  Mastercard

Card number \_\_\_\_\_ Expiry \_\_\_\_ / \_\_\_\_

#### Nominated Financial Details - Bank Account

Account Holder's Name \_\_\_\_\_

BSB Number \_\_\_\_\_ Account Number \_\_\_\_\_

Financial Institution (Name & Address) \_\_\_\_\_

#### Instalments

- Three instalments (29/3/2025, 27/06/2025, 19/09/2025) Amount \$
- Weekly instalments (24/02/2025 -19/9/2025) Amount \$
- Fortnightly instalments (4/03/2025- 19/09/2025) Amount \$
- Monthly instalments Mar-Sept on the 14<sup>th</sup> of each month) Amount \$

Signature Parent/Guardian 1: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature Parent/Guardian 2: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DDR forms need to be submitted for each new calendar year. Please complete this form and email to [fees@gopaltnameadows.catholic.edu.au](mailto:fees@gopaltnameadows.catholic.edu.au) using a laptop or ipad, not iphone.

For full terms and conditions, refer to the Enrolment Policy on the school website and the Parent Enrolment Agreement.