



DEBIT ORDER INSTRUCTION

PAARL BOYS' PRIMARY SCHOOL

FROM: Name of parent:

Address:

.....

.....

Tel:.....Date:

To: The Principal
Boys' Primary School
PO Box 141 Main Street
PAARL 7622

Dear Sirs

MY AGREEMENT IN RESPECT OF

SCHOOL FEES

(Please select fee for which debit order is for. Both can be selected)

AFTERCARE FEES

FOR:Gr.....

The details of my/our bank account are as follows:

BANK NAME

BRANCH CODE

ACCOUNT NUMBER

TYPE OF ACCOUNT

CURRENT /CHEQUE/SAVINGS/TRANSMISSION/

I/We hereby request, instruct and authorise you to debit my/our above-mentioned bank account at the above-mentioned bank (or another bank or branch to which I/we may transfer my/our account) with R -

being the amount required for payment of the monthly instalment due in respect of the above mentioned agreement on the **1st of each and every month commencing on January 2017**. All such withdrawals from my/our bank account by you shall be treated as though they had been signed by me/us personally.

I/We understand that the withdrawals hereby authorised will be processed by computer through a system known as the ACB Magnetic Tape Service, and I also understand that details of each withdrawal will be printed on my bank statement or on an accompanying voucher.

I/We agree to pay any bank charges relating to this debit order instruction.

This authority may be cancelled by me/us by giving you thirty days notice in writing, sent by prepaid registered post, but I/we understand that I/we am/are not entitled to a refund of amounts withdrawn by you while this authorisation was in force.

Receipt of this instruction by you shall be deemed to be receipt thereof by my/our bank (as the case may be).

Signed at on this day of 20

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Signature as used for signing cheques