

I will become a MacKillop Childhood Partner by giving:



Thank

O \$20 O \$50 O \$	each month	you!
I would like my monthly donation	_	
O 1 st of each month	O 15 th of each month	
My payment method:		
O Please debit my credit o	card	
O Visa O MasterCard O D	Diners O Amex	
Card Number	Expires/_	
Name on Card	Signature	
O Direct debit from my ban	ık account	
I,	request and authorise MacKillop Family	Services
to debit \$ each mor	nth from the account below, subject to the terms and conc	ditions of
the Direct Debit Service Agreeme	ent (overleaf).	
BSB: Accour	nt Number:	
Bank:	Branch:	
Account Name:		
Signature:	Date:/	/
My details are:		
Title First Name	Surname	
Address	Postcode	
	Email Address	
Date of Birth		

Please complete and return in the Reply Paid envelope to:

 $Community\ Relations, Mac Killop\ Family\ Services, Reply\ Paid\ 77250, South\ Melbourne\ VIC\ 3205$

We value your support and use your personal information to process donations, issue tax receipts and keep you informed about the difference you are making. We may disclose your details to third party suppliers who assist us to produce communications under strict confidentiality agreements. If you prefer not to receive similar communications from us, or wish to access or update your personal details, please call our Community Relations team on 1300 218 935. Our full privacy policy is available at www.mackillop.org.au. ABN 79 078 299 288



Direct Debit Service Agreement

- 1. This agreement is between MacKillop Family Services, ABN 79 078 299 288 (User ID 418481) and you.
- 2. You agree that MacKillop Family Services will debit your nominated account on the first or fifteenth day of each month, or on the next business day. If you are uncertain as to when the debit will be processed to your account, you should enquire directly with your financial institution. Direct debiting may not be available on all accounts. If in doubt, please refer to your financial institution.
- 3. It is your responsibility to have sufficient funds available in your nominated account by the due date when payments are to be drawn. We may reattempt unsuccessful direct debits or contact you seeking instructions. Any dishonor fees incurred against your account by your financial institution are your responsibility.
- **4.** Should you wish to cancel, defer or make alterations to your direct debit, please:
 - **c**all 1300 218 935 (Monday to Friday, 9.00am-5.00pm)
 - write to MacKillop Family Services, Reply Paid 77250, South Melbourne VIC 3205; or
 - **c.** email support@mackillop.org.au.

Please note we require 14 days notice. Should we vary the initial debit arrangements, we will also give you 14 days notice.

- 5. Should you have any queries or dispute any debit item, please contact MacKillop Family Services, as above, in the first instance. If you do not receive a satisfactory response from MacKillop Family Services to your dispute, contact your financial institution. You will receive a refund of the drawing amount only if MacKillop Family Services cannot substantiate the reason for the drawing or has made an error.
- **6.** All transaction records and account details will be kept private and confidential to be disclosed only at the request of the donor or financial institution in connection with a claim made to an alleged incorrect or wrongful debit.
- 7. You may be asked for your donor ID number and/or date of birth to confirm your identity when accessing or updating your agreement.