

Planned Giving



REWARD WITHOUT COMPROMISE

DIRECT DEBIT REQUEST FORM

I/we request you, the Sydney Diocesan Secretariat, to arrange for funds to be debited from my/our nominated Bank Account or Credit Card Account at the financial institution shown below and credited to

NAME OF MINISTRY ORGANISATION

St Philips Anglican Church, Turramurra South	(1-3 Parkinson Ave, Turramurra South 2074)
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New Application Change of Existing Application

NAME _____

ADDRESS _____

I / We have read and accepted the terms of the Service Agreement overleaf.

SIGNATURE(S)- all signatures are required for joint accounts.

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DIRECT DEBIT FROM BANK ACCOUNT

FINANCIAL INSTITUTION _____

BRANCH NO. (BSB) -

ACCOUNT NO.

ACCOUNT NAME _____

Please debit \$ _____ Payment Frequency One-Off Weekly Fortnightly Monthly Annually

PURPOSE OF PAYMENT _____

COMMENCING: Immediately or / /

SIGNATURE(S)- all signatures are required for joint accounts.

		DATE <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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DIRECT DEBIT FROM CREDIT CARD

TYPE OF CARD Bankcard Mastercard Visa

CARD NO.

EXPIRY DATE /

CARDHOLDER NAME _____

SIGNATURE _____

	DATE <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Please debit \$ _____ Payment Frequency One-Off Weekly Fortnightly Monthly

PURPOSE OF PAYMENT _____

COMMENCING: Immediately or / /

SERVICE AGREEMENT

This document outlines our service commitment to you in respect of the Direct Debit Request arrangements made between the Sydney Diocesan Secretariat and you. It sets out your rights, our commitment to you and your responsibility to us together with where you should go for assistance.

Please ensure:

- (a) Your nominated bank account or credit card account can accept Direct Debit; and
- (b) Sufficient cleared funds are available in the nominated bank account on the day to be drawn on.

At least 14 days notice will be provided in writing if the terms of the initial agreement are to change.

Please contact your local Ministry Organisation to discuss any of the following matters:

1. Defer the drawing
2. Alter the schedule
3. Stop an individual debit
4. Suspend or cancel the Direct Debit Request

Please telephone Glebe Investor Centre on (02) 9284 1448 or 1800 636 134 (Freecall) if you wish to dispute any debit made.

Any dispute will be investigated by the General Manager, Treasury. If you do not receive a satisfactory response from us to your dispute, contact your financial institution who will respond to you with an answer to your claim:

- Within 7 business days (for claims lodged within 12 months of the disputed drawing) or
- Within 30 business days (for claims lodged more than 12 months after the disputed drawing)

You will receive a refund of the drawing amount if we can not substantiate the reason for the drawing.

If the date of drawing is not a business day then the drawing will be made on the closest business day after the due date.

If the drawing is dishonoured, any fees charged to the Secretariat may be passed onto your chosen Ministry Organisation together with any additional cost of administration. The dishonour will need to be replaced with a cheque.

All of the information you supply will be treated as confidential except that information provided to our Financial Institution to initiate the drawing to your nominated account.

INITIAL TERMS OF THE AGREEMENT

In terms of the Direct Debit Request arrangements made between us and signed by you, we undertake to periodically debit your nominated bank account or credit card account for the agreed amount for your commitment.

The first drawing under this Direct Debit arrangement will occur as soon as possible or on the date stated on the Direct Debit Request taking into account the type of commitment.

TO ENSURE
REGULAR
GIVING -
REGISTER
WITH THE
PLANNED
GIVING
SYSTEM

DIRECT DEBIT REQUEST FORM COMPLETION PROCEDURE

To use **Planned Giving** your Ministry Organisation is required to lodge a **Direct Credit Application Form** with the Glebe Investor Centre.

Note: Faxed or photocopied application forms cannot be accepted. Ensure your details are kept up-to-date with your Ministry Organisation by completing and submitting to them a new Direct Debit Request form whenever they change. This application form is used to establish a direct debit payment from a supporter to a Ministry Organisation. The regular payment can be made by the direct debit of a nominated bank account or credit card (Bankcard, MasterCard and VISA only).

FIELD	DESCRIPTION	EXAMPLE
Opening Paragraph	Cross out the wording that is not applicable and advise the name of the Ministry Organisation to be credited.	St Andrews Cathedral Sydney
Application Type	Place a tick in the box to indicate whether or not this is a new application or a change to an existing application.	✓
Name and Address of Supporter	The name, address and postcode of the supporter.	Craig Smith 2 Forster Street, Castle Hill NSW 2154
Signature(s) of Supporter	The signature of the supporter. Note: If debiting from a joint account, all signatures are required.	<i>Craig Smith</i>

1. If the supporter requires to make a direct debit payment from an **account** held with a Financial Institution, ensure that the application form contains the following information:

FIELD	DESCRIPTION	EXAMPLE
Name of Financial Institution	The name of the institution at which the supporter's account is held.	St George
BSB Number	The six-digit BSB number located in front of the supporter's account number.	654-987
Account Number	The supporter's account number (up to 9 digits long).	321321
Account Name	The supporter's account name.	Craig Smith
Debit Amount and Frequency	The value of the debit amount and the frequency of debit. Note: Choice of One-Off, Weekly, Fortnightly, Monthly or Annual debit is available.	\$65.00 Fortnightly
Purpose of Payment	A description of the payment (e.g. planned giving, steeple fund, camp payment etc.).	Planned Giving
Commencement Date	Either immediately or from a nominated start date.	Immediately
Signature(s) of Supporter	The Signature of the supporter. Note: If debiting from a joint account all signatures are required.	<i>Craig Smith</i>
Date	The date of the application.	21/7/05

2. If the supporter requires to make a direct debit payment from a **credit card**, ensure that the application form contains the following information:

FIELD	DESCRIPTION	EXAMPLE
Type of Card	Select from either Bankcard, MasterCard or VISA.	VISA
Card Number	The credit card number.	4509 4931 6886 3194
Expiry Date	The credit card expiry date (MM/YY).	11/06
Cardholder Name	The name printed on the credit card.	Mr Craig Smith
Signature	The signature of the cardholder.	<i>Craig Smith</i>
Date	The date of the application.	21/07/05
Debit Amount and Frequency	The value of the debit amount and the frequency of debit. Note: Choice of One-Off, Weekly, Fortnightly or Monthly debit is available.	\$65.00 Monthly
Purpose of Payment	A description of the payment (e.g. planned giving, steeple fund, camp payment etc.).	Planned Giving
Commencement Date	Either immediately or from a nominated start date.	Immediately