

DEBIT ORDER FORM (one per family)
(Compulsory: Must be completed)

From: (Name of Debtor)
(Address)
.....
Date:

To: The King's School Port Alfred

Dear Sirs,

My Agreement dated:

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

BANK

BRANCH NAME AND TOWN

BRANCH NUMBER

ACCOUNT NUMBER

TYPE OF ACCOUNT CURRENT (CHEQUE) / SAVINGS / TRANSMISSION
(Delete where not applicable)

I/We hereby request, "instruct" and authorise you to draw against my/our account with the above mentioned bank (or any other bank or branch) to which I/we may transfer my/our account) the sum of R

..... (and amount in words), "the amount necessary for payment of the monthly school fees due in respect of the above-mentioned agreement" on the 2nd day of each month commencing on, which amount can be increased as and when the monthly school fees are increased. Should the 2nd fall over a week-end or public holiday, the debit order will operate on the day prior to such week-end or public holiday. 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 electronically.

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 30 (thirty) days notice in writing, but I/we understand that I/we shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force if such amounts were legally owing to you.

Receipt of this instruction by you shall be regarded as receipt thereof by my/our bank.

SIGNED AT ON THIS DAY OF 20.....

.....
SIGNATURE AS USED FOR SIGNING CHEQUES

.....
WITNESS

.....
WITNESS

NOTE: A cancelled cheque should be attached for bank identification purposes (Current accounts only). The user may add to the above minimum requirements for incidental costs.