

BLACKWOOD GOLF CLUB INC

ABN 60 086 867 885

PO Box 1015 Blackwood SA 5051

Telephone: (08) 8388 2313 Facsimile: (08) 8388 2155

Email: info@blackwoodgolf.com.au

AUTOMATIC DEDUCTION AUTHORITY

Request for debiting amounts to accounts by the direct debit system

Date _____

Insert name and address of Financial Institution at which your account is held _____

Insert your name in full I/We _____
(Surname, Company name or Business name) (Given name, or ABN)

request, until further notice in writing, that you debit my/our account described below, any

amounts which **Blackwood Golf Club Inc** ("the User"),

(User ID number: **069005**) may debit or charge me/us through the Direct Debit System.

I/We understand and acknowledge that:

1. The Financial Institution may in its absolute discretion determine the order of priority of payment of any moneys pursuant to this Request or any authority or mandate.
2. The Financial Institution may in its absolute discretion at any time by notice in writing to me/us, terminate this request as to future debits.

Customer Signature(s) _____
(If joint account all signatures may be required)

Customer's Address _____

The Schedule
Insert name of account which is to be debited: _____

BSB Number: _____ Bank Account Number: _____
Note: Direct Debiting is not available on all accounts - If in doubt please refer to your Financial Institution

To Blackwood Golf Club Inc

I/We agree

- to pay all my/our Blackwood Golf Club Inc subscriptions by Direct Debit from my/our account;
- to authorise you to advise my/our nominated Financial Institution through the Direct Debit system of the subscription amounts to be debited from my/our account and the subscription payment dates on which such amounts are to be debited;
- that this Direct Debit arrangement will remain in force until I/we advise you in writing of my/our termination of this authority or you notify me/us in writing that you have terminated this authority;
- that if a rejected payment occurs I/we will be liable to pay you any charge levied by your Financial Institution to you together with an amount to cover your administration costs;
- not to hold you liable other than where you are negligent for any loss which I/we may suffer as a result of this Direct Debit arrangement.

Member Signature _____
(If joint account all signatures may be required)