

Direct Debit Request

Your details

Business: Mater Foundation

ABN: 96 723 184 640

Donor number (if known)	Title	
First name	Surname	
Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Email	
Address		
Suburb	State	Postcode

Select your donation amount

Please accept my monthly gift of:

- \$20 a month
 \$30 a month
 \$50 a month
 My choice of _____ a month

*All donations over \$2 are tax deductible.

Confirm your payment type

I authorise Mater Foundation to deduct my monthly donation on the:

- 1st of each month
 15th of each month

from my:

- Credit card:** please charge this amount to my:
 Visa
 MasterCard
 AMEX
 Diners

Card number:
 Expiry date: /

Cardholder name	Cardholder signature
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OR

- Bank account**

Account name	
BSB number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account holder signature	

I authorise Mater Foundation to debit the above bank account on either the 1st or the 15th of each month (or next business day). I understand that this debit will be subject to the terms and conditions of the Direct Debit Request Service Agreement on the back of this form unless notified otherwise.

Please return this form to:

Mater Foundation, Reply Paid 86807, Coorparoo DC Qld 4151 | Phone: (07) 3163 8000 | Fax: (07) 3163 2737
 Email: fundraisingoperations@mater.org.au | Website: www.materfoundation.org.au

Mater Foundation (ABN 96 723 184 640) is committed to protecting your privacy. Our Privacy Policy is aligned with the Australian Privacy Principles to ensure greater transparency around how we handle your personal information in line with global privacy reforms. Our Privacy policy and notification statement can be read in full at www.materfoundation.org.au/privacy.

Direct Debit Request Service Agreement

Mater Foundation | 620 Stanley Street, Woolloongabba Queensland 4102 | 1800 500 422

This is your Direct Debit Service Agreement with Mater Foundation ABN 96 723 184 640, APCA User ID number 450969. It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider. Please keep this agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR authorisation.

- Definitions**
- account** means the account held at *your financial institution* from which we are authorised to arrange for funds to be debited.
 - agreement** means this Direct Debit Request Service Agreement between *you* and *us*.
 - banking day** means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.
 - debit day** means the day that payment by *you* to *us* is due.
 - debit payment** means a particular transaction where a debit is made.
 - direct debit request** means the Direct Debit Request between *us* and *you*.
 - us** or **we** means **Mater Foundation**, (the Debit User) *you* have authorised by requesting a *Direct Debit Request*.
 - you** means the customer who has signed or authorised by other means the *Direct Debit Request*.
 - your financial institution** means the financial institution nominated by *you* on the DDR at which the *account* is maintained.
- 1. Debiting your account**
- 1.1 By signing a *Direct Debit Request* or by providing *us* with a valid instruction, you have authorised *us* to arrange for funds to be debited from *your account*. You should refer to the *Direct Debit Request* and this *agreement* for the terms of the arrangement between *us* and *you*.
 - 1.2 We will only arrange for funds to be debited from *your account* as authorised in the *Direct Debit Request*.
or
We will only arrange for funds to be debited from *your account* if we have sent to the address nominated by *you* in the *Direct Debit Request*, a billing advice which specifies the amount payable by *you* to *us* and when it is due.
 - 1.3 If the *debit day* falls on a day that is not a *banking day*, we may direct your financial institution to debit *your account* on the following *banking day*. If *you* are unsure about which day *your account* has or will be debited *you* should ask *your financial institution*.
- 2. Amendments by us**
- 2.1 We may vary any details of this *agreement* or a *Direct Debit Request* at any time by giving you at least fourteen (14) days written notice.
- 3. Amendments by you**
- You* may change, stop or defer a debit payment, or terminate this agreement by providing *us* with at least fourteen (14) days notification by writing to:
Mater Foundation, Reply Paid 86807, Coorparoo Qld 4151
or by telephoning *us* on **1800 067 066** during business hours;
or arranging it through your own financial institution, which is required to act promptly on your instructions.
- 4. Your obligations**
- 4.1 It is *your* responsibility to ensure that there are sufficient clear funds available in *your account* to allow a *debit payment* to be made in accordance with the *Direct Debit Request*.
 - 4.2 If there are insufficient clear funds in *your account* to meet a *debit payment*: (a) *you* may be charged a fee and/or interest by *your financial institution*; (b) *you* may also incur fees or charges imposed or incurred by *us*; and (c) *you* must arrange for the *debit payment* to be made by another method or arrange for sufficient clear funds to be in *your account* by an agreed time so that we can process the *debit payment*.
 - 4.3 *You* should check your *account statement* to verify that the amounts debited from *your account* are correct
- 5. Dispute**
- 5.1 If *you* believe that there has been an error in *debiting your account*, *you* should notify *us* directly on **1800 067 066** and confirm that notice in writing with *us* as soon as possible so that we can resolve your query more quickly. Alternatively *you* can take it up directly with your financial institution.
 - 5.2 If we conclude as a result of our investigations that *your account* has been incorrectly debited we will respond to *your* query by arranging for *your financial institution* to adjust *your account* (including interest and charges) accordingly. We will also notify *you* in writing of the amount by which your account has been adjusted.
 - 5.3 If we conclude as a result of our investigations that *your account* has not been incorrectly debited we will respond to *your* query by providing you with reasons and any evidence for this finding in writing.
- 6. Accounts**
- You* should check: (a) with *your financial institution* whether direct debiting is available from *your account* as direct debiting is not available on all accounts offered by financial institutions. (b) *your account details* which *you* have provided to *us* are correct by checking them against a recent *account statement*; and (c) with *your financial institution* before completing the *Direct Debit Request* if *you* have any queries about how to complete the *Direct Debit Request*.
- 7. Confidentiality**
- 7.1 We will keep any information (including *your account details*) in *your Direct Debit Request* confidential. We will make reasonable efforts to keep any such information that we have about *you* secure and to ensure that any of *our* employees or agents who have access to information about *you* do not make any unauthorised use, modification, reproduction or disclosure of that information.
 - 7.2 We will only disclose information that we have about *you*: (a) to the extent specifically required by law; or (b) for the purposes of this *agreement* (including disclosing information in connection with any query or claim).
- 8. Notice**
- 8.1 If *you* wish to notify *us* in writing about anything relating to this *agreement*, *you* should write to
Mater Foundation, Reply Paid 86807, Coorparoo Qld 4151
 - 8.2 We will notify *you* by sending a notice in the ordinary post to the address *you* have given *us* in the *Direct Debit Request*.
 - 8.3 Any notice will be deemed to have been received on the third *banking day* after posting.