







The Christian Schools Trust (CST) 30 Acacia Ave, Christchurch 8041

Paym	ent Options (plea	ise tick one)	☐ Quarterly	y □ Monthly	☐ Fortnightly	□ Weekly
Direct	t debit author	ity				
Му а	ccount to be debited (a		Initiator's a	uthorisation code		
					0 2 2	0 4 8 4
Name	e of my bank:					
					A	pproved
Bank	Branch	Account		Suffix	2048	01/24
rom th	e acceptor to my b	ank:				
authoris	se you to debit my a	ccount with the	amounts of dir	ect debit instruct	ions received from	
	<i>ristian Schools' Tru</i> nce with this authorit			orisation code sp	pecified on this auth	nority and in
	hat this authority is s	•				
• r	my bank's terms and	l conditions tha	t relate to my a	ccount, and		
• t	the terms and condit	ions listed belo	w.			
Διιτ	:horised signature/s:				Date:	
7 (4)	anoniood olgilataro, o.				Bato.	
					1	,
Specific	conditions relating	g to notices ar	nd disputes			
whe	ree that the initiator re the direct debit is direct debit in the se	in a series, the				
2) Chai	nges to the amounts	or dates of a s	series of direct of	debits require 30	days' prior notice to	o me.
3) I car me.	n also agree with the	Initiator to rece	eive a same da	y notice for direc	t debits specifically	requested by
	otices must be in wr	iting, but can b	e delivered eled	ctronically, if I ha	ve agreed that with	the Initiator.
5) Icar	n also ask you to rev	erse a direct de	ebit up to 120 d	ays after the dire	ect debit if:	
,	I didn't receive prope		•	•		
•	I received notice but notice.					or date on the
		dobit but the Ir	sitiator ratrica it	within E business	a daya of the origin	al direct debit
	u dishonour a direct derstand that the Init					ai direct debit,
	For Bank Use Only					-
	-	Date Received:	Recorded by: C	hecked by:	BANK	'
	Original - Retain at Bran				STAMP	
	Copy - Forward to Initia	tor if requested				