

DIRECT DEBIT AUTHORISATION FORM

INSTRUCTION:

Please complete Part I, Part II and Part IIIB of the form and return it to Pathlight School to enable your child's school fee to be deducted from your Bank Account.



Part I :

To: The Manager (Account Holder's Bank & Branch Name & Address)																
Account Holder's Name(s) and NRIC No :																
My/Our Bank Account No :																
Bank			Branch			Bank A/C No. to be credited										
7	1	7	1	0	0	1	0	0	1	9	0	1	4	8	5	9

HOW TO APPLY :

1. To complete part I, Part IIa and Part III b & c of this form.
2. To sign against amendments and do not use correction tape fluid.
3. Submit this form to Approved Institution

I/We hereby authorise you to confirm acceptance/rejection of my Direct Debit Authorisation to Pathlight School and further authorise Pathlight School to initiate and you to process debits to my/our account even though this may result in an overdraft or an increase of the overdraft on my/our account.

You are entitled to dishonour such payments and may at your discretion, levy a fee should my/out account not containing the necessary funds. You are under no obligations to ascertain that the name on the record of Pathlight School is the same as that provided by me/us whether or not notice of the bill underlying the debit has been given to me/us.

This authorisation shall continue to be in force until I/We have expressly revoked it by written notice delivered to you. You may in your absolute discretion terminate this arrangement by written notice, delivered to my/our address last known to you.

I/We agree that you shall not be liable for any losses arising from or in any way connected with you so acting provided that you act in good faith or unless directly caused by or resulting from you or your employees' wilful default or negligence.

Date

Signature(s)/Thumb Print(s) (as in Bank A/c)

Part II : For Official Use (To be completed by Customer's Bank)

Bank			Branch			Pathlight School Bank A/C.										
7	1	7	1	0	0	1	0	0	1	9	0	1	4	8	5	9
Bank			Branch			Bank A/C No. to be Debited										

Part IIa: Please fill in student's/sibling Birth Cert No under this column.

Student's Birth Certificate No:

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Part III A : To The Principal, Pathlight School
5, Ang Mo Kio Ave 10, Singapore 569739

Bank			Branch			Pathlight School Bank A/C.											
7	1	7	1	0	0	1	0	0	1	9	0	1	4	8	5	9	
Bank			Branch			Bank A/C No. to be Debited											

Part III B : Student Name & Class

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Part III C : Student's Birth Certification No.

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The Direct Debit Authorisation in respect of the above-mentioned account is hereby *accepted/rejected.

If rejected, reason:

Date

Authorised Signature & Stamp of Customer's Bank

Pathlight School

Name of Approving Bank Officer