



Monthly Donor Form

Please complete this form and return it to:

Animal Aid
PO Box 34
Coldstream VIC 3770



Title:	Miss/Ms/Mrs/Mr	Full Name:	
Street Address:			
Suburb:			
Postcode:		Post Box No:	
Phone No.:		Mobile:	
Email Address:			

Monthly Donation amount: \$ _____

Please accept my payment by:

Cheque/Money order **Credit Card** **Direct Debit to Animal Aid**

Please make cheques out to Animal Aid Please complete below

See bank details below

Have my account/credit card debited directly EziDebit (3rd party payment solution)

If you select this option please complete the EziDebit form on the following page

Credit Card

Card Type: Visa Mastercard Bankcard

Card Number: _____ - _____ - _____ - _____ **CCV:** ____

Expiry Date: __ / __ **Name on card:** _____

Signature:

Direct Debit to the Animal Aid bank account

Please ensure your name appears as remitter for tracking purposes

Account: Victorian Animal Aid
Trust

Acct. Number: 131-333-056 **BSB:** 633-000

Thank you for your generous support!



Direct Debit Request



Tel: (03) 9739 0300 Fax: (03) 9739 0400



Get Paid On The Dot
ABN 67 096 902 813

New Customer Form

Customer Reference: ANA GEN 16727

Surname: (Or Business Name) Given Name:

Mobile Ph: I authorise Ezi Debit to remind me of upcoming debits via SMS.

Email:

Debit Arrangement / Payment Details

And/Or the total amount billed for the specified period for this and any other subsequent agreements or amendments.

1. **Once Only Debit** Date: Debit \$.

2. **Regular Debits** Date: Debit \$.

3. **Debit Frequency** Weekly Fortnightly Monthly (Default) 4 Weekly

4. **Debit Duration** Continue regular debits Until Further Notice (Min. Payments) (Default)

Until I have Paid: Regular Debits

Fees / Charges

Administration Fee:	N/A	Transaction Fee:	N/A	Credit Card Fee:	Visa/Mastercard Amex/Diners	N/A	SMS Payment Reminder:	\$0.45
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Debit from Bank, Building Society or Credit Union Account

Direct Debit is not available on the full range of accounts
- if in doubt please refer to your financial institution

Financial Institution: Branch:

BSB Number: - Account Number: (9 Digits MAX)

Account Holder Name(s):

I / We authorise Ezi Debit Australia Pty Ltd User ID 165969 to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance to the Payment Details stated above and as per the Service Agreement provided.

Debit from Credit Card

VISA MasterCard AMEX Diners

Card Number:

Expiry Date: /

Card Holder Name:

By signing this form, I / We authorise Ezi Debit Australia Pty Ltd, acting on behalf of the business to debit payments from my specified credit card above, and I / we acknowledge that Ezi Debit Australia will appear as the business name on my credit card statement.

This Authorisation is to remain in force in accordance with the Terms and Conditions on this page, the provided Service Agreement, and I/we have read and understand the same.

Signature(s) of Nominated Account Date

Office Use Only:

S1

Received Date:

Reference No:

Ver 1.0

COMPLETE USING BLACK INK ONLY

DDR Service Agreement

I/We hereby authorize Ezi Debit Australia Pty Ltd (ACN: 096 902 813) **Direct Debit User ID number 165969** (herein referred to as Ezi Debit) to make periodic debits on behalf of the "Business" as indicated on the front of this Direct Debit Request (herein referred to as the Business)

I/We acknowledge that Ezi Debit is acting as a Direct Debit Agent for the Business and that Ezi Debit does not provide any goods or services and has no express or implied liability in regards to the goods and services provided by the Business or the terms and conditions of any agreement with the Business.

I/We acknowledge that the debit amount will be debited from my/our account according to the terms and conditions of the agreement with the Business.

I/We acknowledge that bank account and credit card details have been verified against a recent bank statement to ensure accuracy of the details provided. If uncertain you should contact your financial institution.

I/We acknowledge that it is my/our responsibility to ensure that there is sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honoured on the debit date. Direct debits normally occur overnight; however transactions can take up to three (3) business days depending on your financial institution. I/We acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available, I/We agree that Ezi Debit will not be held responsible for any fees and charges that may be charged by your financial institution.

I/We Acknowledge that there may be a delay in processing if:

- 1) There is a public or bank holiday on the day, or any day after the debit date
 - 2) A payment request is received by Ezi Debit on a day that is not a Banking Business Day
 - 3) A Payment request is received after normal Ezi Debit cut off times, being 4pm QLD time Monday to Friday.
- Any payments that fall due on any of the above will be processed on the next business day.

I/We authorise the Business to vary the amount of the payments from time to time as provided for within the Business agreement. I/We authorise Ezi Debit to vary the amount of the payments upon instructions from the Business. I/We do not require Ezi Debit to notify me/us of such variations to the debit amount.

I/We acknowledge that the business is to provide 14 days notice if proposing to vary the terms of the debit arrangements.

I/We acknowledge that variations to the debit arrangement will be directed to the Business.

I/We acknowledge that any request to stop or cancel the debit arrangement will be directed to the Business.

I/We acknowledge that any disputed debit payments will be directed to the Business. If no resolution is forthcoming you are advised to contact your financial institution.

I/We acknowledge that if a debit is returned by my/our financial institution as unpaid, I/We will be responsible for any fees and charges for each unsuccessful debit in addition to any financial institution charges and collection fees, including and not limited to any solicitor fees and collection agent fees appointed by Ezi Debit.

I/We authorise Ezi Debit to attempt to re-process any unsuccessful payments as advised by the Business.

I/We acknowledge that if specified by the Business, a setup, variation, SMS or processing fees may apply as instructed by the Business.

Credit Card Payments

I/We acknowledge that "Ezi Debit Australia" will appear as the business name for all payments from credit card. I/We acknowledge and agree that Ezi Debit will not be held liable for any disputed transactions resulting in the non supply of goods and/or services and that all disputes will be directed to the business as Ezi Debit is acting as a 3rd party payment provider. I/We Acknowledge and agree that in the event that a claim is made, Ezi Debit will not be liable for the refund of any funds.

Ezi Debit will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made in it relating to an alleged incorrect or wrongful debit, or otherwise required by law. Further information relating to Ezi Debit's Privacy Policy can be found at www.ezidebit.com.au

Credit Card Fees are a minimum of the transaction fee or the credit card fee which ever is greater.

I/We authorise:

- 1) The Debit User to verify details of my/our account with my/our financial institution
- 2) The Financial Institution to release information allowing the Debit User to verify my/our account details.