

Medical Information

Does your child suffer from any medical condition? (E.g. asthma, epilepsy, allergies etc.)? Yes No

If Yes, please specify and provide a medical plan (e.g. asthma, anaphylaxis etc.)

Is your child currently on any medication? Yes No

If yes, Please specify:

Additional Information -Student

Special Skills (Musical instruments, dancing, singing, etc.):

Languages other than English and Sinhala:

Parent - Is Parent/Guardian a member of the Temple? Yes No

(If NO, please complete the attached membership form)

Fees- \$ 10.00 per week for 40 weeks payable annually or twice a year by authorizing direct debit from a nominated bank . \$ 8.00 payable if there are more than one child from a family.

Direct Debit Request

Request and Authority to debit

Your Surname or company name

Your Given names or ABN/ARBN

“you”

request and authorise NORTH VICTORIAN BUDDHIST ASSOCIATION ABN 76258758289 User ID XXXX to arrange a debit to your nominated account to pay for membership and other fees as deemed payable by you.

This debit or charge will be arranged by NORTH VICTORIAN BUDDHIST ASSOCIATION institution and made through the Bulk Electronic Clearing System Framework (BECS) from your nominated account and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

Amount of debit

\$160.00 (6 months for more than one child)

\$320.00 (12 months for more than one child)

\$200.00 (6 months for one child)

\$400.00 (12 months for one child)

Any amount NORTH VICTORIAN BUDDHIST ASSOCIATION, has deemed payable by you

Your account to be debited

Name/s on account

Financial

BSB number (Must be 6 Digits)

Account number

Account holders contact details

Email:

Phone:

Confirmation

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request you confirm that:

you are authorised to operate the nominated account; and
you have understood and agreed to the terms and conditions

set out in this Request and in your Direct Debit Request Service Agreement.

Your Signature

Signed in accordance with the account authority on your account:

.....
Signature

Second account signatory (if required)

.....
Signature

Email:

Phone:

Signing for a company

You must be authorised to sign on behalf of the company AND you must have authority to operate the Company’s bank account.

Signature of duly authorised officer: Dated

Position held:

Name:

Address:

E Mail:

Phone:

Second company signatory (if required)

Signature of duly authorised officer: Dated

Position held:

Name:

Address:

E Mail:

Phone:

Direct Debit Request Service Agreement

This is your Direct Debit Service Agreement with NORTH VICTORIAN BUDDHIST ASSOCIATION ABN 76258758289 User Id XXXX (the Debit User). 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 written, verbal or online request between us and you to debit funds from your account.

us or **we** means NORTH VICTORIAN BUDDHIST ASSOCIATION (the Debit User) you have authorised by requesting a Direct Debit Request.

you means the customer who has authorised the Direct Debit Request.

your financial institution means the financial institution at which you hold the account you have authorised us to debit.

Debiting your account

1. By submitting a Direct Debit Request, you have authorised us to arrange for funds to be debited from your account. The Direct Debit Request and this agreement set out the terms of the arrangement between us and you.
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.
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.

Amendments by us

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 sent to the preferred email or address you have given us in the Direct Debit Request.

How to cancel or change direct debits

You can:

- (a) cancel or suspend the Direct Debit Request; or
- (b) change, stop or defer an individual debit payment at any time by giving us at least **14 days'** notice.

To do so, contact us at **info@nvba.org.au**

or

by telephoning us on **03 93334848** during business hours;

You can also contact your own financial institution, which must act promptly on your instructions.

Your obligations

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*.

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) we may charge you reasonable costs incurred by us on account of there being insufficient funds; 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*.

You should check *your account* statement to verify that the amounts debited from *your account* are correct.

Dispute

If you believe that there has been an error in debiting your account, you should notify us directly by email info@nvba.org.au Alternatively you can contact your financial institution for assistance.

If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging within a reasonable period 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.

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.

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*.

Confidentiality

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.

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).

Contacting each other

If you wish to notify us in writing about anything relating to this agreement, you should write to

NORTH VICTORIAN BUDDHIST ASSOCIATION
1690 Mickleham, Rd, YUROKE 3063

Or

info@nvba.org.au

We will notify you by sending a notice to the preferred address or email you have given us in the Direct Debit Request. Any notice will be deemed to have been received on the second banking day after sending.

Parent/Guardian Privacy Consent and Declaration

I confirm that the information provided on this enrollment form is true and correct and I acknowledge and agree to the terms and conditions of enrollment accompanying this enrollment form.

I consent to:

- ***The collection of my child's health and personal information by the North Victorian Buddhist Association.***
- ***The Principal or teacher (where the Principal or teacher in charge is unable to contact me) to administer such first aid to my child as the Principal or staff member may consider to be reasonably necessary including disclosing personal and health information to professional third parties in the event of a medical emergency.***

.....
Signature of Parent/Guardian:

Date