

Student Name:

Course Name:

Direct Debit Authorisation Form

Student I.D:

Authorisation for Protea College to directly debit a credit card, debit card or bank account for one or a series of payments starting on a certain date and recurring at certain intervals for a defined number of payments as detailed below. Please note that a 2.2% surcharge applies to all credit card payments.

	Email Address:		Contact Number:	
Payment Plan Schedule:				
Due Date	Amount	Due Date	Amount	
	otal of All Payments sho	chedule section above and I give wn above has been paid in full to be extinguished. CREDIT CARD	•	
BANK ACCOUNT		CILDIT CAILD		
Name of Pank		Card Type:	Dobit Corre	
Name of Bank: Account Holder Name:		Card Type: Visa Card Number:	Master Card Debit Card	
Account Holder Name:			Master Card Debit Card CVV:	
Name of Bank: Account Holder Name: BSB: Account Number:		Card Number:		