



Registered No. A0007793C - ABN 64 806 504 671

PO Box 5059 Mildura VIC 3502

Telephone (03) 5023 1147 Email: administration@milduragolfresort.com.au

DIRECT DEBIT REQUEST

Request and Authority to debit the account named below to pay
Mildura Golf Resort

Request and Authority to debit

Your Surname or Company name _____

Your Given names or ABN/ARBN _____ "you"

Request and authorise **Mildura Golf Resort Direct Debit User ID 462524** to arrange, through its own financial institution, a debit to your nominated account any amount **Mildura Golf Resort** has deemed payable by *you*.

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from *your* account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

Name and address of financial institution at which account is held

Financial institution name _____

Address _____

Insert details of account to be debited

Name/s on account _____

BSB number (Must be 6 Digits) |_|_|_|_|_| - |_|_|_|_|_|

Account number |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Acknowledgment

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and **Mildura Golf Resort** as set out in this Request and in your Direct Debit Request Service Agreement.

Insert your signature and address

Signature _____

(If signing for a company, sign and print full name and capacity for signing eg. director)

Address _____

Date __/__/__

Second account signatory (if required)

Signature _____

(If signing for a company, sign and print full name and capacity for signing eg. director)

Address _____

Date __/__/__