## Scheduled Fees, Umpire Fees, Fines/Other Direct Debit Form



## **Direct Debit Request and Authority To Debit**

By signing this document, I/We authorise: **Adelaide Footy League** with ABN **22 605 973 501** and with Debit User Number 539615, the Debit User, to debit my/our account, detailed in the Schedule below, through the Direct Debit System. I/we must pay you when due under the arrangement between us.

This debit or charge will be arranged by Adelaide Footy League's financial 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.

**This authority is to remain in force until further notice**. Two weeks' written notice is required to cancel this direct debit agreement.

The Schedule			
Club Name:			
Financial Institution Name:			
Bank Account Name:			
Bank Address:			
BSB Number:	Account Number:		
Maximum Debit Amount Per Tran	nsaction (ensure this covers all possible wee	ekly amounts): \$	
Frequency of Debits:			
Umpire Fees (Mandatory)	Scheduled Fees (Mandatory)	Fines/Other (Mandatory)	
Weekly	☐ Annually (Instalment x 1, date as per Adelaide Footy League Fees) ☐ Monthly (Instalments x 4, dates as per Adelaide Footy League Fees) ☐ Fortnightly (Instalments x 8, dates as per Adelaide Footy League	As incurred, within 7 days of invoice date	
Only persons authorised to operamust sign.  Account Signatory	ate on the account must sign below. If ther	re are two to sign on the bank accou	unt, both persons
	Position Held:	Signature:	
	Suburb:		
Email:	Phone:	Date:	
Second Account Signatory (if req	uired)		
Name:	Position Held:	Signature:	
Address:	Suburb:	Postcode:	
Email:	Phone:	Date:	
It is the Club's responsibility to in	form The League of any changes to accou	<mark>nt signatories.</mark>	