



DIRECT DEBIT AUTHORISATION

Method of Payment

Administration Fee (once only): \$2.20 Bank Account Transaction Fee: \$0.88 Credit Card Transaction Fee: VISA/MasterCard: 1.87% (Min \$0.88)

I/We authorise and request Ezidebit Pty Ltd ACN 096 902 813 ("Ezidebit") to debit payments from my/our account, as specified below, at intervals and amounts as directed by World4Kids Pty Ltd ("The Business") as per the Terms and Conditions of my agreement with the Business and in accordance with this Direct Debit Request and the Ezidebit DDR Service Agreement (Ver 1.5).

Choose your payment method

Debit from **Credit Card** Mastercard Visa

Card Number _____

Expiry Date __/__/__

Name of Cardholder _____

By signing this form, I/We authorise Ezidebit, acting on behalf of the Business, to debit payments from my specified Credit Card above and I/We acknowledge that Ezidebit will appear as the merchant on my credit card statement. Furthermore, I/We agree to reimburse and indemnify Ezidebit for any successful claims made by the Card Holder through their financial institution against Ezidebit.

Debit from **Bank, Building Society or Credit Union Account**

Financial Institution _____ Branch _____

BSB Number ____ - ____ Account Number _____

Account Holder Name _____

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This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request, the Ezidebit DDR Service Agreement (Ver 1.5) and I/We have read and understand same.

Signature(s) of Nominated Account _____ **Date** __/__/__

NOTE: If payments decline, an Ezidebit dishonour fee applies