

## APPLICATION FORM FOR INTERBANK GIRO

**PART 1: To be completed by applicant. Please return original form to Canossaville Children & Community Services.**

Name (Canossaville Student/ Donor\*): \_\_\_\_\_

**To: Name of Bank:** \_\_\_\_\_ **Branch:** \_\_\_\_\_

**Instructions to the Bank:**

- a) I/We\* hereby instruct you to process Canossaville Children & Community Services' instructions to debit my/our\* account.
- b) You are entitled to reject Canossaville Children & Community Services' debit instruction if my/our\* account does not have sufficient funds and charge me/us\* a fee for this.

**Instructions to Canossaville:**

- a) This authorisation will remain in force until terminated by you or upon receipt of your written notice sent to the bank or upon receipt of my/our\* written revocation through Canossaville Children & Community Services.
- b) I/We\* agree to Canossaville Children & Community Services collecting, using and/or disclosing my/our\* personal data for the purposes of processing and administering this recurring payment arrangement.

My/Our* Name(s) as in Bank Account: _____ My/Our* Bank Account No.: _____ My/Our* Contact No.: _____	My/Our* Signature(s): _____ Date: _____
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**PART 2: For Canossaville Children & Community Services' completion**

Customer's Reference No. _____  Bank    Branch    Canossaville Account No.  7171    048    048-008000-6	Giro form collected by: _____ Staff's Signature/Date Staff's Name: _____	Verified by: _____ Finance Manager's Signature/Date
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**PART 3: For Bank's completion**

**To: Canossaville Children & Community Services**

This Application is hereby **REJECTED** (please ✓) for the following reason(s):

- Signature differs from Bank's record
- Amendments not countersigned by applicant
- Wrong account number
- Others (please specify): \_\_\_\_\_
- Signature incomplete/unclear\*

\_\_\_\_\_  
**Name of Bank's Approving Officer      Bank's Authorised Signature      Date**

\* Please delete where inapplicable