



BPOINT ONLINE PAYMENT SERVICE – CREDIT CARD REGULAR PAYMENT REQUEST

Request and Authority to debit the credit card account named below to pay:

MAZENOD COLLEGE, 55 GLADYS ROAD, LESMURDIE WA 6076

Please select the relevant request type: Amendment New

Request and Authority to debit Credit Card Account	Name: _____ Address: _____ Request and authorise MAZENOD COLLEGE to debit my credit card account as detailed below to pay my child's school fees. This authority remains in force until such time that I provide written instruction to amend or cancel this authority. Return completed form to: schoolfees@mazenod.wa.edu.au
Insert details of Credit Card Account to be debited	Name of Cardholder: _____ Type of Credit Card: <input checked="" type="checkbox"/> Mastercard <input checked="" type="checkbox"/> Visa Card Number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Expiry Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
Debit Frequency	The first debit may be made on <u>DD / MM / YYYY</u> and thereafter at <input checked="" type="checkbox"/> weekly, <input checked="" type="checkbox"/> fortnightly or <input checked="" type="checkbox"/> monthly intervals.
Debit Amount	The amount to be debited each time is \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> (Amount in words) _____
Debit End Date	The debits are to continue: Until further notice OR until: <u>DD / MM / YYYY</u> OPTIONAL: Suspend debits after Final Payment and resume on: <u>DD / MM / YYYY</u>
Insert your signature	Signature: _____ Date: <u>DD / MM / YYYY</u> Child's Name: _____ School Year: _____
FOR SCHOOL USE ONLY:	
New Agreement / Amendment of Existing Authority	
Family Code: _____	
Date Received: <u>DD / MM / YYYY</u> Date Actioned: <u>DD / MM / YYYY</u>	
Staff member (actioned by): _____	