

# CREDIT CARD PAYMENT REQUEST



**OUR LADY OF  
GRACE SCHOOL**

Request and Authority to debit the credit card account named below to pay Our Lady of Grace School.

**Please complete all sections of this form.**

REQUESTOR'S DETAILS	FAMILY ID (If known)
Surname	Phone Number (during business hours)
Given Name/s	Email address
Address	Postcode

CREDIT CARD DETAILS	
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Expiry Date	/ CVV <input type="text"/> <input type="text"/> <input type="text"/>
Name on card	

Request and authorize Our Lady of Grace to debit my credit card as detailed below to pay my child's school fee account. This authority remains in force until such time that I provide written instruction to amend or cancel this authority.

PAYMENT DETAILS	
Amount \$	
Date of first payment / /	Date of last payment / / OR <input type="checkbox"/> ongoing
By selecting the ongoing option you authorise your deduction amount to be adjusted from the next available deduction after January 31st each year.	
OLOG Finance will advise you of your fee payment amount each year to ensure the full year's fees are paid	
Debits to be made at the following intervals:	
Frequency	<input type="checkbox"/> Weekly (Starting 1st Feb) <input type="checkbox"/> Fortnightly (Starting 1st Feb) <input type="checkbox"/> Monthly (15th of the month)
Adhoc charges	<input type="checkbox"/> I give authority to debit my account for adhoc charges (eg after school sport) in the next scheduled payment available after such charges being issued.
Cardholder's Signature	Date

OFFICE USE ONLY	
<b>NEW AGREEMENT / AMEND EXISTING AUTHORITY</b>	
Family Code	
Date Received	
Date Actioned	