



Financial Response Form

contact details.

Mr / Mrs / Miss / Ms / Dr / Rev / Other:

Name:

Address:

STREET

SUBURB

STATE

POSTCODE

Phone:

PHONE 1

PHONE 2

Email:

Your privacy is important to us. We will not use the information collected on this form for any purpose outside of the ministries and activities of AFES or disclose this information to a third party without your prior consent. To view our Privacy Statement see our website: www.afes.org.au/about/privacy

supporting.

Please direct my support to:

Regular contribution

I would like to make a regular contribution of \$

fortnightly monthly quarterly 6-monthly yearly
(direct debit only)

One-off contribution

I would like to make a one-off contribution of \$

Note: All donations will be allocated to the campus/staffworker you nominate. When a staffworker ceases, any surplus funds will be reallocated at the discretion of AFES.

payment details.

Direct Debit

This is our preferred method of giving. Your supporter dollar goes further with direct debit because it incurs the lowest bank fees.

Please begin my direct debit from the following account on or after date:

Account Name:

BSB:

Account number:

I/we agree to the direct debit terms and conditions on the reverse of this form. Note: both signatures may be required if using a joint account.

Signature:

Date:

Credit Card

Regular Credit Card deductions are made on the 1st Friday of every month.

Name on card:

MasterCard Visa

Card number:

Expiry:

Signature:

Direct Deposit (Internet Banking)

Please return this form to us and we will email you the AFES bank account details and your unique reference number, which you must use to ensure your donation goes to the staffworker or campus you wish to support.

Cheque

Please ensure a cheque made payable to 'AFES' is enclosed. Please DO NOT put the name of the staffworker or campus on the cheque.

OFFICE USE ONLY

ID # _____ Batch _____ Supporting _____ Amt _____

Direct debit terms and conditions

I/we authorise AFES (User ID 65593) to arrange for the above funds to be debited from my/our account at the financial institution identified above as prescribed by the Bulk Electronic Clearing System. This authorisation is to remain in force in accordance with the terms described in the following service agreement: 1. Direct debiting is not available on the full range of accounts. If in doubt, please refer to your financial institution. 2. You are advised to check your account details by contacting your financial institution. 3. Your account will be debited at the frequency specified, from the date specified (or the nearest working day). 4. It is your responsibility to ensure sufficient clean funds are in the nominated account when payments are to be drawn. Bank dishonour fees may apply if insufficient funds are in the account. If the transaction is returned unpaid, we will contact you seeking your instructions. 5. Should you wish to cancel, defer, or make alterations to the direct debit arrangement, please ring 02 9697 0313 at least 7 days before the usual debit date. We will give you 14 days notice if we vary any of the debit arrangements. 6. Should you have any queries or dispute any debit item, please contact AFES in the first instance. 7. Your records and account details will be kept private and confidential to be disclosed only if requested by yourself or the financial institution if a claim is made for an alleged incorrect or wrongful debit.

PLEASE POST TO:

AFES Reply Paid 684 KINGSFORD NSW 2032