DEBIETORDERTOESTEMMINGSVORM - 2027

('N NUWE DEBIETORDERVORM MOET AAN DIE BEGIN VAN ELKE JAAR INGEVUL WORD)

Ek gee hiermee toestemming dat Laerskool Charlo my bankrekening mag debiteer onder die volgende voorwaardes:

1. Die debietorder sal in werking wees vir 11 maande (Jan tot Nov 2027 of Feb tot Des 2027).
2. **Ouers het die 2 opsies oor datum van debietorder:**
   - **1ste van elke maand - Februarie tot Desember**
   - **25ste van elke maand - Januarie tot November**

   Indien die betrokke datum op 'n Sondag of op 'n publieke vakansiedag val, sal die debietorder die volgende werksdag verhaal word.
3. Die bedrag sal wees soos jaarliks deur die Beheerliggaam vasgestel. Die skoolgeldbydrae sal nie verander sonder dat ouers skriftelik/telefonies kennisgewing ontvang nie.
4. Indien my debietorder vir een of ander rede deur die bank geweier word, moet die bedrag in kontant direk by die skool betaal word, voordat die volgende debietorder betaalbaar is. Enige bankkoste wat gehef word, sal deur my betaal word.
5. Dit is my verantwoordelikheid om die skool te verwittig van enige verandering in my bankbesonderhede.
6. Die debietorder kan slegs van lopende-, transmissie of spaarrekeninge verhaal word.

Geteken: …… Tel: …….. (h/sel)

…….. (w)

Posadres:

……

INLIGTING BENODIG

Naam van Rekeninghouer: ……..

Naam van Bank: ……..

Tak van Bank en Takkode: ……..

Rekeningnommer: ……..

Tipe Rekening: ……..

Datum van Debietorder: ……

Naam van Kinders: Graad:

1. ……
2. ……
3. ……

Bedrag van Debietorder vir Skoolgeld R ……

Bedrag van Debietorder vir Nasorg R …… Totaal: R ……

DEBIT ORDER CONSENT FORM - 2027

(A NEW CONSENT FORM MUST BE COMPLETED AT THE BEGINNING OF EVERY YEAR)

I agree that Charlo Primary School may debit my bank account under the following conditions:

1. The debit order will operate for 11 months (Jan to Nov 2027 or Feb to Dec 2027).
2. **Parents have 2 options to choose from for the date of the debit order:**
   - **1st day of each month - February to December**
   - **25th day of each month - January to November**

   Should the chosen day of the debit order fall on a Sunday or public holiday, the debit order will be collected the following working day.
3. The amount will be advised by the Governing Body of the school. The contribution will not change without prior written/telephonic notice to the parents.
4. If, for any reason my debit order is not honoured, the outstanding amount will be paid in cash directly to the school prior to the next order becoming due. Any fine that the bank may levy, will be for my account.
5. It is my responsibility to inform the school of any change to my banking details.
6. The debit order only operates off a current, transmission of savings account.

Signed: …….. Tel: …….(h/cell)

…….(w)

Postal address:

……..

INFORMATION REQUIRED

Name of Account Holder: ……..……..

Name of Bank: ……..……..

Branch and Branch Code: ……..……..

Account Number: ……..…….

Type of Account: …….

Date of Debit Order: …….

Names of Children: Grade:

1. ……
2. ……....
3. ……

Amount of Debit order for School Fees R ……..……

Amount of Debit order for Aftercare Fees R……..…… Total: R ……