

# Regular Giving



## (1) REGULAR GIVING AMOUNT

I wish to join the Regular Giving Program by donating \$ \_\_\_\_\_ each    month     quarter     year

I choose to regularly donate using my (Credit Card Account / Direct Debit Account) shown below.

## (2) CREDIT CARD PAYMENT

Please debit my                    AMEX Card                     MasterCard                     Visa Card

Credit Card Number \_\_\_\_\_

Cardholders Name \_\_\_\_\_ Card Expiry \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## (3) DIRECT DEBIT PAYMENT

I / We request Royal Life Saving Society Australia, (RLSSA), User ID No 313783, to arrange for funds to be regularly debited from my / our account at the financial institution identified below and as prescribed through the Bulk Electronic Clearing System. If debiting from a joint bank account, both signatures are required. This authorisation is to remain in force in accordance with the terms described in the service agreement attached.

Bank Name \_\_\_\_\_

Account Name \_\_\_\_\_ Branch Name \_\_\_\_\_

Account Number \_\_\_\_\_ BSB Number \_\_\_\_\_ -- \_\_\_\_\_

Signature \_\_\_\_\_ Second Signature \_\_\_\_\_

## (4) PERSONAL DETAILS FOR RECEIPT – all donations over \$2.00 are tax deductible.

Title \_\_\_\_\_ First name \_\_\_\_\_ Surname \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone H \_\_\_\_\_ Phone W \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

## (5) THANKS FOR THAT! NOW POP THIS FORM IN THE POST TO:

The Royal Life Saving Society Australia PO Box 558 Broadway NSW 2007

ABN 71 008 594 616

Telephone 1300 733 778 Facsimile (02) 8217 3199 Email [jenny@rlssa.org.au](mailto:jenny@rlssa.org.au) Website [www.royallifesaving.com.au](http://www.royallifesaving.com.au)

# Royal Life Saving Regular Giving Program Service Agreement

1. The Royal Life Saving Society Australia (RLSSA) will debit your nominated credit card or direct debit account on the 20<sup>th</sup> day of each month / quarter / year. If the due date for payment falls on a non-working day or public holiday the payment will be processed on the next working day.

2. Please ensure sufficient funds are in the nominated account when payments are due as RLSSA will not be responsible for any overdrawn fees or interest charges. If the transaction is returned unpaid, we will contact you seeking your instructions.

3. Should you wish to modify your Regular Giving arrangement, please contact us on 1300 733 778 or write to RLSSA at Reply Paid 558, Broadway, NSW 2007, giving us 14 days notice.

4. We will give you at least 14 days notice, in writing or by telephone, if we need to change the terms of the Regular Giving arrangement.

5. If you have any queries or you wish to dispute any debit item, please contact us and we will try our hardest to resolve the issue. If you do not receive a satisfactory response from us, you can contact your financial institution who will respond to your claim.

6. RLSSA respects your privacy. We will not use or disclose any information about you to any third party without your consent, unless required by law.

7. By signing a Regular Giving Service Agreement you have authorised RLSSA to arrange for funds to be debited from your nominated account or credit card, according to the agreement we have with you.

The Royal Life Saving Society Australia PO Box 558 Broadway NSW 2007

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