



HEALTH SERVICES UNION DIRECT DEBIT REQUEST

Name of Financial Institution

Branch Address

I, We
Surname First name Middle name

Authorise the Health Services Union – SA Branch with User ID No. 2041 2581.01 to arrange funds to be debited from my/our account for union membership fees. Identified by Reference Number (insert your Membership Number) held with below financial institution and described in The Schedule.

The Schedule

Name(s) of Account

(BSB Number)

(Account Number)

Fortnightly Commence on:/...../.....

I / We have read and understood the "Service Agreement" and acknowledge and agree to it.

I/We request this Arrangement remain in force in accordance with The Schedule described above and in compliance with the "Service Agreement"

- The Bank/Financial Institution may, in its absolute discretion, determine the order of priority of payments by it of any moneys pursuant to this request or any authority or mandate.
- The Bank/Financial Institution may, in its absolute discretion, at any time by notice in writing to me/us terminate this request as to future debits.

Signature Date/...../.....
(Joint account required two signatures)

Direct Debit Request Service Agreement

- (1) The HSU (hereafter known as Direct Debit User) will initiate debit items in the manner referred to in the Schedule. Payments will be made when due and no individual advice of payments made will be issued by the Debit User.
- (2) The Debit User in writing will provide 14days notice if the Debit User proposes to vary details of the arrangement including, without limitation the amount and frequency of payments. I/We may contact the debit user in writing about any proposed change before it takes place.
- (3) If I/We wish to defer any payment or alter any of the details referred to in the Schedule. I/We must write to the Debit User or contact the HSU Membership.
- (4) In compliance with industry's Direct Debit Claim process, HSU (Direct Debit User) will assist members disputing any debit item drawn on the nominated BSB/Account in the Schedule of this direct debit request. HSU will endeavour to resolve this matter within the agreed industry timeframe. Members must make their claim in writing to HSU to initiate the process.
- (5) Direct Debit is not available on the full range of accounts of all financial institutions and that I/we must check that the financial institution referred to in the First Part of the Schedule will accept direct debit payments under this agreement.
- (6) Once your application for membership is accepted, your membership begins from the date that you had signed on the Application for Membership providing that appropriate payments are received.

You have a financial obligation as a member to pay contributions either 13 (thirteen) weeks in advance or by signing an "Authorisation for Payroll Deduction" or "Authorisation for Electronic Transfer" to authorise your employer/financial institution to deduct contributions on a regular basis and pay to the union.

The process of Authorisations for Payroll Deduction and Electronic Transfer may be delayed; in this case the effective date of your membership will be the date the monies are received from your employer / financial institution. To ensure that you fully benefit from being a financial member, a cheque or money order should be arranged to cover the initial period while these transactions are processed.

When choosing an electronic transfer option, it is your responsibility to ensure that you have sufficient cleared fund in your account to cover the transactions. Your financial institution may charge you if your account have insufficient funds.

Insufficient funds incur on two consecutive occasions will automatically cancel the arrangement and as the consequence your membership will become un-financial.