



TRADITIONAL SHOTOKAN KARATE JINDOKAI KARATE-DO

PO Box 506. Salisbury. SA 5108 | 0404 836 084 | dion@jindokai.com.au



SUBSCRIPTION VARIATION / UPDATE FORM

Participant / Account Name:

Administration Fee: Included, FREE OF CHARGE, each year:

- 1 X Subscription Set-up / Update, per year
- 1 X Subscription Amendment / Suspension, per year

Account Management: over and above this – will incur an Administration Fee of \$15.00 per amendment.

UPDATE / ADD CONTACT INFORMATION

EMAIL

MOBILE

CANCELLATION

You can cancel your Direct Debit Agreement with Jindokai Karate-Do, at any time; by providing **14 days written notice**. Please accept this form as notification of cancellation of my subscription to Jindokai Karate-Do.

NOTICE DATE

LAST PAYMENT DATE

ADD / UPDATE / RECOMMENCE MY SUBSCRIPTION

I/We authorise payment of Karate Participation Fees as outlined below, and in accordance with our Direct Debit agreement with Jindokai Karate-Do. Karate Class Direct Debits are taken fortnightly and can be cancelled at any time, with **14 Days Written Notice**, as outlined in the Direct Debit Agreement.

- | | | |
|--------------------------|----------------------------------|---|
| <input type="checkbox"/> | Individual – Subscription | \$15.00 / week (Debited fortnightly @ \$30.00) |
| <input type="checkbox"/> | Family – Subscription | \$30.00 / week (Debited fortnightly @ \$60.00) |
| <input type="checkbox"/> | Casual Visit | \$10.00 / session (Pay as you go) |

All Regular Participants are required to Pay an **Annual Membership** with the **Australian Karate Federation**

UPDATE BANKING / CREDIT CARD DETAILS – FOR DIRECT DEBIT PAYMENTS

NAME ON CARD / ACCOUNT HOLDER

CARD NUMBER

EXPIRY DATE

SECURITY CODE

BANK CODE / BSB

ACCOUNT NUMBER

Debit Arrangement Statement

- I / We authorise Global Payments Australia 1 Pty Ltd ACN 601 396 543 (referred to as "Ezidebit") to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS), on behalf of Jindokai Karate-Do, in accordance with this Direct Debit Request.
- I/We acknowledge that there is a Failed Transaction Fee of \$14.80

PRINT NAME

SIGNATURE

DATE

PAYMENT COMMENCEMENT DATE: