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DEBIT ORDER INSTRUCTIO	N -	- 2025
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AIL NISI OPTIMA							
DEBIT ORD	ER INST	RUCTION - 2025					
A. AUTHORITY	1				CUSTOMER NO.		
PARENT NAME	:	<u></u>				_	
CONTACT NUN	/IBER:		EMAIL:				
NAME(S) OF PUPIL(S):			GRADE(S) IN 2025:				
	THIS C	BANK ACCO (*NB: PLEASE ATTACH A BA AN BE DOWNLOADED FROM Y			*)		
BANK NAME:							
BRANCH NUM	BER:						
ACCOUNT NU	MBER:						
ACCOUNT HOL	DER NAME	:					
	/ A B I B I I A I	SELECT DEBIT ORDER PAYM			ALIDII \		
Y / N	•	SCHOOL FEE - R56 500 PER F			MONTH/PER PUPIL		
Y / N 10 MONTHS (FEBRUARY - NOVEMBER) INCL. CAPITAL Y / N 12 MONTHS (JANUARY - DECEMBER) INCL. CAPITAL L				- '	R4,808 PER MONTH/PER PUPIL		
Y / N MUSIC FEE TO BE ADDED TO THIS DEBIT ORDER IN				<u> </u>	C FEES ATTACHED	_	
,							
		DEBIT ORDER DATE OPT	IONS - PLEASE SEL	ECT ONE			
5TH		16TH	26TH	L <i>F</i>	AST DAY 30/31		
 against my ba I agree that th If the paymer to that day. I agree that the order amount 	ink account ne payment nt day falls c nis instruction	erford High School to issue and do as per the deduction(s) selected instruction will be issued and de on a weekend or public holiday, the name of the pure seannually in accordance with the pure seannually in accordance with the pure seannually in accordance with the seannually	above including any r livered on the above- he payment day will a pil's schooling at Wes	related bank charge selected date of each tutomatically be the sterford High Schoo	es. ch month. e business day prior	w	
B. MANDATE							
_	•	yment instructions issued by We s had been issued by me persona	-	shall be treated by	my abovementioned		
C. CANCELLATI	ON						
still due and	payable as a	Authority and Mandate may be agreed. I also understand that I can authority and Mandate if such an	annot reclaim amoun	ts, which have beer	n withdrawn from my		
Signed on this	day	of20					
			ACCOL	UNT HOLDER SIGNA	ATURE		