

**DEBIT ORDER AUTHORISATION FORM**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Full Names )I.D. No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residential/Postal Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(No. & Street) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Suburb ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( City ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Postal Code )

Tel. No(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_ ( Home ) (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Work ) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Cell )

Hereby instruct and authorise DOODLECANCERDOODLELIFE to debit my bank account every month on the 1st/25th/30th( Circle date)of the month, for the amount of R100/R200/R300 ( Circle Amount) Own amount R\_\_\_\_\_\_\_. All such withdrawals from my bank account shall be treated as though I had signed them personally. I understand that the withdrawal hereby authorised will be electronically generated and I also understand that details of each withdrawal will be printed on my bank statement.

I may cancel this authorisation/instruction by notifying DOODLECANCERDOODLELIFE, giving thirty day’s notice in writing. However, I understand that I shall not be entitled to any refund of amounts which were withdrawn/processed whilst this authorisation was in force.

**BANK DETAILS**

Account Holder\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Full Names )

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

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

Branch Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account type( e.g cheque/savings )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ On this the \_\_\_\_\_\_ Day of \_\_\_\_\_\_\_\_\_\_\_\_\_( Month )\_\_\_\_\_\_\_( Year )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**