APPLICATION FOR INTERBANK GIRO

PART 1: FOR APPLICANT'S COMPLETION

Date: | | | | | | | | |

Name of Billing Organisation: Ngee Ann Alumni

Name of Bank:

Applicant's Name:

Branch:

Ngee Ann Alumni Membership Number: | | | | | |

(a) I/We hereby instruct you to process Ngee Ann Alumni's instructions to debit my/our account.
(b) You are entitled to reject Ngee Ann Alumni's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
(c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through Ngee Ann Alumni.
(d) Amendments made on the form must be countersigned by applicant.
(e) This application will supersede existing payment arrangement of this membership account with Ngee Ann Alumni.

Name(s) As In Bank Account:

My/Our Company Stamp/Signature(s)/ Thumbprint(s)*:

Bank Account Number:

Contact (Tel/HP) Number(s):

(Please go to the bank with your identification if the account is operated by thumbprint.)

PART 2: FOR NGEE ANN ALUMNI'S COMPLETION

Bank	Branch	NAA's Bank Account Number

Bank	Branch	Account Number To Be Debited

Ngee Ann Alumni Reference Number: | | | | | |

PART 3: FOR FINANCIAL INSTITUTION'S COMPLETION

To: Ngee Ann Alumni
This application is hereby REJECTED (please ✓) for the following reason(s):

☐ Signature/Thumbprint* differs from Bank's records
☐ Signature/Thumbprint* incomplete/unclear*
☐ Account operated by signature/thumbprint*
☐ Wrong account number
☐ Amendments not countersigned by customer
☐ Others: _____

Name of Approving Officer

Authorised Signature

Date

*Please delete where applicable