

**BANYULE NETWORK DIRECT OFFERING FORM**

* *Please complete areas highlighted in yellow*

**REQUEST TO SET UP A RECURRING DIRECT DEBIT PAYMENT**

DATE: ……………….

MY BANK: ……………………………………………………………………

MY NAME: …………………………………………………………………..

**I WISH TO SET UP A RECURRING DIRECT DEBIT PAYMENT FROM MY ACCOUNT**

COMMENCEMENT DATE: …………………….

AMOUNT $: ………………………

FREQUENCY: ONCE-OFF / WEEKLY / FORTNIGHTLY / MONTHLY / ANNUAL

*(Please circle response)*

FROM:

MY BANK ACCOUNT – NAME: ……………………………………………………………….

BSB: ……………….

ACCOUNT NUMBER: ……………………………………………….

**TO THE BANYULE NETWORK DIRECT OFFERINGS ACCOUNT:**

**BANK:** BENDIGO BANK

**ACCOUNT NAME:** BANYULE NETWORK DIRECT OFFERINGS

**BSB:** 633-000

**ACCOUNT #:** 185375458

NAME: ………………………………………………………………

SIGNATURE: …………………………………………………….