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Debit Order Authorisation Term 2 Exams Special Offer May 7 – Jun 27 2025 (all four terms for 2025)

| | polprojects.co.za 6 066 204 0064 In the Bank NP_ | | Email Address tion Number Address: | 2014/145914/07 | hoolprojects.co.za | |
|--|---|--|--|--|---|------------------------|
| Authority and Mandate for Paymen | ts Instruction: E | lectronic and | Written Mandates | 8 | | - |
| Client Details Full Names | | | Surname | | | _ |
| ID Number | | | Physical Addres | s | | _ |
| Postal Code | | | | | | _ |
| Mobile Phone Number | | | Email Address | | | - |
| Payment Details Account Holder | | | Bank | | | _ |
| Account Number | | | Branch code | | | _ |
| Type of Account Cheque | Savings 🔲 Trans | smission | Monthly Amount | R | | |
| | Mo | onthly paymer | nts are as follows | (Mark ✓) | | |
| One grade - Standard Package: | R95,00 per mor | nth 🔲 | Two grades – Pr | ime/Standard package | R160,00 per month | |
| One grade - Prime Package: | R115,00 per mo | onth | Three grades – I | Prime/Standard Package | R220,00 per month | |
| Indicate the grade or grades that y | ou order | | | | | |
| You will receive an SMS message to a | approve the debit | order authoris | ation on your Ban | k App or internet banking s | ervice - reference NP A | SP. |
| This agreement will be valid for a m cancellation is received the contract v grade. No notice or cancellation will b | will automatically in accepted within | renew every ye the first 12 mo | ear for another 12 onths of this contra | months and the subscription ct. The monthly amount ma | n will be carried over to | the next |
| This signed Authority and Mandate re mentioned Bank (or any other bank of I hereby authorise you to issue and exceed my obligations as agreed to in is terminated by me giving you notice address indicated above. | r branch to which deliver payment in the Agreement a | I may transfer nstructions to y and commencir | my account) on co your Banker for co ng on | ollection against my aboven and continuing | nentioned account at my until this Authority and | y above- Mandate |
| The individual payment instructions so | o authorised to be | e issued must b | e issued and deliv | rered as follows: | | |
| On the day of each and ever recognised South African public holids funds in the nominated account to me sufficient funds are available in my ac | ay, the payment of eet the obligation. | day will automa | itically be the prece | | . Further, if there are in | sufficient |
| I understand that the withdrawals her also understand that details of each w in the said payment instruction and if the issuing of any payment instruction such amounts were legally owing to y | ithdrawal will be p provided to you sl n. I shall not be er | orinted on my b hould enable y | ank statement. Eacout to identify the A | ch transaction will contain a greement. A payment refere | number, which must be ence is added to this for | included m before |
| Mandate I acknowledge that all payment instrume personally. | ctions issued by | you shall be tre | eated by my above | ementioned Bank as if the in | nstructions have been is | ssued by |
| Cancellation I agree that although this Authority an any refund of amounts which you have be valid for a minimum of one year (12 contract will automatically every year cancellation will be accepted within the | ve withdrawn while 2 months). The co renew every year | e this Authority ontract has to b for another 12 | was in force, if so be cancelled in mon months. A contract | uch amounts were legally on nth 11 of the initial contract. | wing to you. This agree If no cancellation is rece | ment will eived the |
| Assignment I acknowledge that this Authority may absence of such assignment of the Ag | | | | | ned to that third party, b | out in the |
| Terms and Conditions I understand and agree to all Terms a | and Conditions set | t out by you as | stated on your we | bsite. | | |
| Signed at | on this _ | | day of | 20 | | |
| | | | | ing on the account) | | |
| For office use: | | | | | | |