

# QVC Dental Health Membership Direct Debit Request

PO Box 463 Rockingham 6968

☎ 08 6555 4900



**For QVC only:**  
Membership No.

**PLEASE COMPLETE FORM IN BLOCK CAPITALS**

<b>Commencement Date</b> All direct debits will be collected on or around the 5 <sup>th</sup> of each month	<b>05/</b>
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Full Name/s of Each New Member	Date of Birth
1.	
2.	
3.	
4.	
5.	

<b>Contact Address</b>			
<b>Telephone</b>		<b>Email</b>	

**Membership and Fees**  
I understand that there is a \$20 joining fee (over 18's only) and that this will be deducted from my account with my first payment.

<b>Type of Membership</b> (adult, kids, family)		<b>Monthly Fee</b>	\$
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**Direct Debit Request and Authority**  
I/we request and authorise Dental Care Membership Pty Ltd (353471) to debit the account identified below through the Bulk Electronic Clearance System (BECS), subject to the Terms and Conditions and the Direct Debit Request (DDR) Service Agreement.

<b>Financial Institution Name</b>			
<b>Branch Address</b>			
<b>Account Holder Name</b>			
<b>Account No.</b>		<b>BSB</b>	

By signing below I acknowledge, understand and agree to the Terms & Conditions as set out in this request and in the DDR Service Agreement.

<b>Signed</b>		<b>Date</b>	
<b>If joint account: Signed</b>		<b>Date</b>	

### **Definitions**

**Account** means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

**Agreement** means this Direct Debit Request Service Agreement between you and us.

**Debit Day** means the day that payment by you to us is due.

**Direct Debit Request** means this agreement between us and you.

**Us or We** means QVC - Dental Care Membership.

**You** means the customer who has signed, or authorised by other means, the Direct Debit Request.

**Your financial institution** means the financial institution nominated by you at which the account is maintained.

### **Debiting your Account**

By signing the Direct Debit Request, you have authorised us to arrange for funds to be debited from your account each month, in line with your welcome letter specifying the amount payable. We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request.

If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account will be debited you should ask your financial institution.

### **Amendments**

We may vary any details of this agreement or a Direct Debit Request at any time by giving you at least 14 days' written notice.

You may change, stop or defer a debit payment, or terminate this agreement by providing us with at least 30 days' notification by writing to QVC Dental or arranging it through your financial institution, which is required to act promptly on your instructions, and notifying us in writing.

### **Your Obligations**

It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the Direct Debit Request.

If there are insufficient clear funds in your account to meet a debit payment:

- you may be charged a fee and/or interest by your financial institution
- you may also incur fees or charges imposed or incurred by us
- you must arrange for sufficient funds to be in your account by the following debit date so that we can process two payments.

You should check your account statement to verify that the amounts debited from your account are correct.

### **Dispute**

If you believe that there has been an error in debiting your account, you should notify us directly as soon as possible. Alternatively, you can take it up directly with your financial institution.

If we conclude as a result of our investigations that your account has been incorrectly debited, we will arrange for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

If we conclude as a result of our investigations that your account has not been incorrectly debited, we will respond to your query by providing you with reasons and any evidence for this finding in writing.

### **Accounts**

You should check:

- with your financial institution whether direct debiting through the Bulk Electronic Clearing System (BECS) is available from your account, as it may not be available on all accounts
- your account details which you have provided to us are correct by checking them against a recent account statement
- with your financial institution if you are unsure how to complete the Direct Debit Request.

### **Confidentiality**

We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information. We will only disclose information that we have about you to the extent specifically required by law or for the purposes of this agreement (including disclosing information in connection with any query or claim).

### **Notice**

If you wish to notify us about anything relating to this agreement, call us on 08 6555 4900 in the first instance.

We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request. Any notice will be deemed to have been received on the fourth banking day after posting.