

Newtown School

Waterford, Ireland.

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SEPA Direct Debit Mandate	
UMR:	NEWTOWN
Creditor Identifier: 30297 SCHOOL	
By signing this mandate form, you authorise (A) Newtown School to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from Newtown School. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank. Please complete all the fields below marked *	
*Your Name :	
*Your Address:	Address Line 1
	Address Line 2
	Address Line 3
*City/postcode	* Country:
* Account number(IBAN)	
*Swift BIC	
	Newtown School Newtown Road Newtown Waterford
*Type of payment: Recurrent <u>or</u> One-Off Payment (Please tick V)	
*Date of signing:	
*Signature(s)	