



GOLD CARD CLUB

2011 / 006826 / 23

www.goldcardclub.co.za

WONDER SPA BUILDING

Hans Spirow NO 1

VANDERBILJPARK



P O BOX 341
PARK

SOUTH

E MAIL : james@goldcardclub.co.za

1910

TEL : 086 72 777 60

CELL 084 317 7111

FAX: 086 524 8077

BANK DEBIT ORDER INSTRUCTION – CREDIT CARD AUTHORITY

Name (Debtor) : _____ Date : _____

Address : _____ Signatory name : _____

_____ Contact Tel : _____

Dear Sirs/Madams

The details of my bank account are as follows:

BANK : _____ CARDHOLDERS NAME : _____

BRANCH/TOWN : _____ CARD NUMBER : _____

BRANCH NO. : _____ EXPIRY DATE : _____

ACCOUNT NAME: _____ CVV NUMBER : _____

ACCOUNT NO. : _____ (three digit number on back of card)

TYPE OF A/C : _____ CARD TYPE : _____

(savings,current, transmission)

(master card, visa)

I/we hereby request and authorize you to draw against my/our account with the abovementioned bank (or any other bank or branch to which I/we may transfer my/our account) the sum of _____ (state amount in words) or any variable amount pertaining to this agreement, on the first working day of each month. This being the amount necessary for the settlement of the monthly due to you in respect of our purchases/contract/agreement dated ____/____/____.

All such withdrawals from my/our account by you shall be treated as though they had been signed by me/us personally.

I/we the undersigned, "instruct" and authorize your agent Netcash (Pty) Ltd, to draw against my/our account. I/we understand that if bank details have been supplied the withdrawals authorized here will be processed by BankServ. I/we also understand that details of each withdrawal will be printed on my/our statement.

I/we agree to pay any banking charges relating to this debit order instruction.

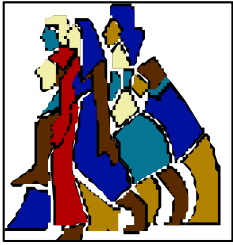
This authority may be cancelled by means of giving you thirty days notice in writing, sent by prepaid registered post, but I/we understand that I/we shall not be entitled to any refund of amounts, which you have withdrawn whilst this authority was in force if such amounts were legally owing to you.

Assignment:

I/We acknowledge that the party hereby authorized to effect the drawing(s) against my/our account may not cede or assign any of its rights and that I/we may not delegate any of my/our obligations in terms of this contract/authority to any third party without prior written consent of the authorized party

Signed _____ on this _____ day of _____ 20__

**FROM THE PEOPLE TO THE PEOPLE
MEMBERS: JAMES RALSTON**



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SIGNATURE AS USED FOR SIGNING CHEQUES OR CREDIT CARD VOUCHERS

**FROM THE PEOPLE TO THE PEOPLE
MEMBERS: JAMES RALSTON**