

Direct Debit Authorization 直接付款授權書

[School Fees]

〔學費〕

Date 日期 : _____

Name of party to be Credited (The Beneficiary) 收款之一方(受益人)	Bank No.銀行編號	Branch No.分行編號	Account No. to be credited 收款賬戶之號碼
St. Stephen's College Management Committee	0 0 4	8 0 1	1 8 8 8 3 0 0 0 1

1. I/We hereby authorize my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below. 本人〈等〉現授權本人〈等〉的上述銀行，〈根據受益人或其往來銀行及 / 或代理行不時給予本人〈等〉銀行的指示〉自本人〈等〉的戶口內轉賬予上述受益人。惟每次轉賬金額不得超過以下指定的限額。
2. I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us. 本人〈等〉同意本人〈等〉的銀行毋須證實該等轉賬通知是否已交予本人〈等〉。
3. I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s). 如因該等轉賬而令本人〈等〉的戶口出現透支〈或令現時的透支增加〉，本人〈等〉願共同及個別承擔全部責任。
4. I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice. 本人〈等〉同意如本人〈等〉的戶口並無足夠款項支付該等授權轉賬，本人〈等〉的銀行有權不予轉賬，且銀行可收取慣常的收費，並可隨時以一星期書面通知取消本授權書。
5. I/We agree that any notice of cancellation or variation of this authorization which I/We may give to my/our Bank shall be given at least one month prior to the date on which such cancellation/variation is to take effect. 本人〈等〉同意，本人〈等〉取消或更改本授權書的任何通知，須於取消 / 更改生效日最少一個月之前交予本人〈等〉的銀行。
6. This authorization shall have effect until further notice. 本授權書將繼續生效直至另行通知為止。

PLEASE COMPLETE IN BLOCK LETTERS 請用正楷填寫
(This form will not be accepted if it contains any erasure or amendment 本表格如有任何塗改，概不受理)

My/Our Bank Name and Branch 本人〈等〉之銀行及分行名稱	Bank No.銀行編號	Branch No.分行編號	My/Our Account No.本人〈等〉之賬戶號碼
My / Our Name(s) as recorded on Statement / Passbook 本人〈等〉在月結單/存摺上所記錄之名稱			Contact Tel No. 聯絡電話號碼
^Limit for Each * Payment/Month 每次/月付款之限額 \$30,000	My / Our Address as recorded on Statement / Passbook 本人〈等〉在月結單/存摺上所記錄之地址		
Name of Debtor (Student) (if other than Account Holder) 債務人(學生)之姓名 (若非賬戶持有人) S1		^ My/Our Signature 本人〈等〉之簽名	
^ Debtor's Reference (Filled in by the College) 債務人之參考(此欄由校方填寫)			
For Bank Use Only 銀行	Remarks		Signature Verified

* Please delete whichever is not appropriate. 請刪去不適用者。

^ NOTES 附註 :

1. If the amount of your payments is likely to vary each time, set the **Limit for Each payment** at the maximum amount you would expect to pay at any one time. 如 台端付款之數額每次可能不同，則請將最高者定為每次付款之最高限額。
2. The above signature(s) should **correspond with specimen signature(s) of your bank account**. 以上簽名必須與閣下之銀行賬戶簽名相符。
3. In the box marked "Debtor's Reference" enter the identifying reference between yourself and the party to be credited e.g. Student No. etc. (This field to be completed by the College) 在債務人之參考欄內，請將 貴戶受款一方之關係，略以說明，例如學生編號等。(此欄由學校填寫)
4. Please return or mail the completed form to General Office, St. Stephen's College, 22 Tung Tau Wan Road, Stanley, Hong Kong. 請將已填妥的表格交回或寄回香港赤柱東頭灣道22號 聖士提反書院校務處。

Effective 01 / 2020