

Sandford Park School

SEPA Direct Debit Mandate

By signing this mandate form, you authorise Sandford Park School (A) to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from Sandford Park 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 B 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 marked *

Creditor Name: Sandford Park School
Creditor Address: Sandford Road, Dublin D06FN29
Creditor ID: IE94SDD301853

Student Name:*

Sandford Park Account Number:*

Type of payment:*(
(Please tick one)

Recurrent Payment

☐

OR

One-off payment

☐

Debtor (Your) Name:*(
(Please use block capitals)

Debtor Address:*

Country:

Debtor (Your) account number – IBAN:*

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Debtor bank identifier code – BIC:*

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Date of Signature:*

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Please sign here:*

Signature(s)

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PLEASE RETURN THIS MANDATE TO SANDFORD PARK SCHOOL

TO BE COMPLETED BY SANDFORD PARK SCHOOL

Unique Mandate Reference

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