## **Direct Debit Authority**



To arrange a direct debit please read the Direct Debit Service Agreement and return this completed form. A copy of the Agreement is available on the Dental Protection Limited (DPL) Australia website dentalprotection.org.au

In completing this form, you are providing MDA National Insurance Pty Ltd (User ID 227682) with an enduring authority to debit your nominated account in payment of the Membership Subscription and Insurance Premium. This Direct Debit Authority remains in force and will be used to pay for future Membership Subscriptions and Insurance Premiums until you advise us that you no longer wish to continue with this arrangement. We will provide you with written notice of future Membership Subscriptions and Insurance Premiums to be debited under this Authority.

Member name	Member number
Payment type	
Please select your payment frequency MONTHLY QUARTERLY	YEARLY
Bank Account  Account name  Financial institution  OR  BSB  Account no.	Credit Card  VISA MASTERCARD AMEX DINERS  Cardholder name  Card number  Expiry date  /
Authority	
I have read the Direct Debit Service Agreement and I authorise MDA National Insurance Pty Ltd (User ID 227682) to debit the account nominated above in payment of any Membership Subscriptions and Insurance Premiums in the amount shown on my Renewal/Instalment Notice or quotation form, or as otherwise authorised by me. I understand that this Authority is enduring and will continue until I request that it be cancelled and that it can be used to pay future Membership Subscriptions and Insurance Premiums.  Please SIGN and DATE below	
X SIGN HERE	DD / MM / YYYY
Please return this form either by: Email: membership@dpla.com.au	

If you have any queries, please contact our Membership team on 1800 444 542 or email membership@dpla.com.au.

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