



Centrelink Centrepay Deduction Authority Form

By completing this form, you are providing consent to Wonthaggi Primary School to start Centrepay deductions. The information collected in this form is confidential and is stored securely.

Centrepay Account Holder Information

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: _____

Centrelink Reference Number: _____

Payment Type: _____
(eg. Family Tax Benefit/Newstart/Pension.)

Reason for the Deduction _____
(Eg. Camp, Parent Payments)

Details of the payment

This is a one off payment **Start Date:** _____

Deduction Amount: _____

This is a regular payment **Start Date:** _____

Target Amount: _____

Fortnightly payment (min \$20): _____

Final Payment date: _____

I authorise Services Australia to make a deduction as detailed above, from my Centrelink payment and pay this amount to **Wonthaggi Primary School** for Education Expenses.

Australian Privacy legislation protects your personal information. I give permission for Wonthaggi Primary School to disclose my information to Services Australia for the purposes of checking my account number, billing number and amount I want to pay, and reconciling my payment Deduction details.

I have sufficient funds available to make this payment

I understand that I can change or cancel my Deduction at any time: and further information about Centrepay can be found online at servicesaustralia.gov.au/centrepaybusiness.

Customer Signature: _____

Date: _____

Contact Phone number _____