



Direct Debit Form

Student Details			
Name		Student ID	
Address			
Suburb		Post Code	
Email		Mobile	

Section 2: Payment Method

I authorise Innovative College to debit the amount/s as specified below:

Card	☐ Visa	☐ Mastercard	☐ Amex
Card Type	☐ Debit	☐ Credit	
Expiry Date	DD / MM	CCV	
Amount of Payment			
Name on Card			
Card Number			
Signature			
Date			

Card Charges

Credit Card: extra 2.5% of the debit amount will be charged

Debit/Savings Card: extra 1.5% of the debit amount will be charged

These fees are non-refundable

Section 3: Office Use Only

Processed By:					
Processed Date:					
Amount of Payment		Amount of Surcharge		Total Charge	
Receipt Number					

Innovative College Pty Ltd

ABN 86 649 204 697 | CRICOS Code: 04004H | RTO Provider ID: 45831

Head Office: 87 Fennell Street, North Parramatta NSW 2151 Australia

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Direct Debit Authority Form V1 June 2026