INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT.

DIRECT Debit

Please do not send a photocopy or fax of this form to HFMA — The signed original is required to enable this to be processed correctly and on time. Please fill in the whole form using a ball point pen and send it to:

HFMA, Albert House,
111 Victoria Street,
Bristol BS1 6AX

Originator's Identification Number

6	5	5	4	9	3

This is not part of the instruction to your Bank or Building Society

For Official use only

Name(s) of Account Holder(s)

Bank/Building Society account number

Branch Sort Code

Name and full postal address of your Bank or Building Society

To the Manager — Bank/Building Society

Address

Postcode

Reference Number (Please leave blank- for HFMA office use only)

Banks and Building Societies may not accept Direct Debit Instructions from some types of account.

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY

Please pay HFMA Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with HFMA and if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

DATA PROTECTION ACT 1998

The Healthcare Financial Management Association will hold your personal data (for example, your contact details) on its computer database. This information may be accessed, reviewed and used by HFMA and its associates for normal administrative purposes (for example, processing your membership application /renewal and contacting you in respect of your membership) and conducting internal market research. HFMA may also periodically send you information on events, conferences and publications you may be interested in. If you do not wish to receive such information please tick this box. ☐

HFMA may also provide your personal information to carefully selected third parties (a list of whom are available on request) in order to provide you with information on non-HFMA events, conferences, publications and various affinity benefits. Where possible, the information sent to you by third parties will be targeted to focus on your likely interests. However, if you do not wish your personal details to be used in this way, please tick this box. ☐

This guarantee should be detached and retained by the Payer.

THE DIRECT DEBIT GUARANTEE

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits

- If there are any changes to the amount, date or frequency of your Direct Debit HFMA will notify you 7 working days in advance of your account being debited or as otherwise agreed. If you request HFMA to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit by HFMA or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society
- If you receive a refund you are not entitled to, you must pay it back when HFMA asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.