

## **DIRECT DEBIT HOLD REQUEST**

Request Details * Indicates Mandatory Field										
*Account Holders Name				Customer Number (if known)						
*Customer Name	9	*Class Name & Time	ame & Time *Last Class Date†		te <sup>†</sup> *R	*Return Class Date†‡				
† Each customer is entitled to a maximum of four weeks per calendar year on hold without losing their enrolment ‡ All UQ Sport enrolments are paid in advance, payments may re-commence up to four weeks prior to the re-commencement date										
Hold Request Authority										
Signature			Date	e: /	I	(dd/mm/yyyy)				

Forms must be handed into the UQ Aquatic Centre or emailed to - swimschool@uqsport.com.au

Office Use Only									
Customer Number	Previous Weeks on Hold	Weeks in Request	Total Weeks On Hold	Approved	Processed				
Hold Request is Approved by Centre   Customer Informed									
Request Processed By			Request Proce	essed					
Direct Debit Adjustme	ent		Adjusted Direct Deb	it Date:	1 1				