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| SEPA Direct Debit Mandate  Unique Mandate Reference - sfdffsdfasfasdfasdfasfsasdas\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | GSA - NTSI high res Please complete the required fields below and return to :-  General Manager,  Singman Ltd, t/a The Gaiety School of Acting,  Essex Street West,  Temple Bar,  Dublin 8. |
| Creditor Identifier: IE76ZZZ306251  Creditor Name: Singman Ltd t/a The Gaiety School of Acting  Creditor Address: Essex Street West,  Temple Bar,  Dublin 8. |
| Legal Text: By signing this mandate form, you authorise (A) Singman Ltd. to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from Singman Ltd.  As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which you account was debited. Your rights are explained in a statement that you can obtain from your bank.  Please complete all the fields below marked \* | |
| \*Your Name :  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \* Your Address:  \*City/postcode: \* Country:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \*Account number (IBAN):  \*Swift BIC:  \*Type of payment Weekly **or** Monthly (Please tick √)  \*Signature:  \*Date: | |
| **For The Gaiety School of Acting purposes only**  \*Debtor Name  \*Student Name(If different to above)  Course name  By singing below you agree to the following;   * I instruct you to pay Direct Debits from my account at the request of **Singman Ltd.** * I confirm that the amounts to be debited are variable and may be debited on various dates. * I shall duly notify the Bank in writing if I wish to cancel this instruction. I shall also so notify **Singman Ltd** of such cancellation.   \*Signature:  \*Date: | |