



# St. James' Church Kindergarten (Harding)

29 Harding Road, S. 249537 · Tel: 64766026 · Fax: 64766029 · Email: [info@sjck.org.sg](mailto:info@sjck.org.sg) · Website: [www.sjck.org.sg](http://www.sjck.org.sg)

## **Direct Debit Authorisation Instructions for GIRO/Child Development Account Application**

Please ensure the following are attached with your Application forms:

1. Copy of monthly Statement Of Accounts (for purpose of verification of account name & number)
2. A copy of the CDA account holder's Birth Certificate (sibling only), if CDA account holder is not the child who is enrolling into SJCK **AND** sibling is not currently enrolled in SJCK

All application forms **MUST** be completed **in ink** and any amendments **MUST BE COUNTERSIGNED** by parent account holder. No correction fluid is allowed to be used on the form.

Application will take 4 - 6 weeks to process by the bank.

Registrar

*Revised Dec 2016*

Please complete all sections unless otherwise indicated.

## 1 Application Form for Interbank Giro for OCBC Child Development Account (CDA)

### HOW TO APPLY

1. Complete Section 2 of this form.
2. Sign against amendments and do not use correction fluid.
3. Submit to the Approved Institution.

Student year of admission/level,  
or class if any: \_\_\_\_\_

Funds in the OCBC Child Development Account (CDA) or CDA Extra can be deducted via GIRO to pay Approved Institutions.

Approved Institution (AI) means childcare centre, kindergarten, special education school or healthcare institution in respect of which approval has been granted to a person as an approved person under regulation 11 of the Child Development Co-Savings Act 2001.

Please log on to MSF's website ([www.babybonus.gov.sg](http://www.babybonus.gov.sg)) for the list of Approved Institutions.

## 2 For Trustee's Completion

Name of Approved Institution (AI)

*(Please check with your AI for the correct name used to deduct CDA funds)*

ST. JAMES' PRESCHOOL SERVICES (ANGLICAN) LTD.

Child's Name (as in CDA)

\_\_\_\_\_

Child's Birth Certificate

T \_\_\_\_\_

CDA Number

\_\_\_\_\_

Trustee's Name

\_\_\_\_\_

Home Number

\_\_\_\_\_

Mobile Number

\_\_\_\_\_

Office Number

\_\_\_\_\_

- (a) I hereby instruct OCBC Bank to process the Approved Institution's instructions to debit my OCBC Child Development Account (CDA).  
 (b) OCBC Bank is entitled to reject the Approved Institution's debit instruction if my OCBC CDA does not have sufficient funds.  
 (c) This authorisation will remain in force until terminated by OCBC Bank's written notice sent to my address last known to the Bank or upon receipt of my written revocation through the Approved Institution or to the Bank.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

For thumbprints, please verify with OCBC branch before submitting this form to the Approved Institution.

## 3 For Approved Institution's Completion

### AI's Account Number

Bank Code

7 3 7 5

Branch Code

0 0 1

Account Number

4 5 1 3 0 5 1 9 1 8

### OCBC CDA Number

Bank Code

7 3 3 9

Branch Code

\_\_\_\_\_

Account Number

\_\_\_\_\_

(Branch code is the 1st 3 digits of the OCBC CDA Number)

(Following 9 digits of the OCBC CDA Number)

Reference Number

T \_\_\_\_\_

## 4 For Bank's Completion

To: Approved Institution

Rejection Reason:

- |   |   |
|---|---|
| <input type="checkbox"/> Signature/thumbprint^ differs from Bank's record | <input type="checkbox"/> Signature/thumbprint^ incomplete/unclear |
| <input type="checkbox"/> Account operated by signature/thumbprint^        | <input type="checkbox"/> Wrong account number                     |
| <input type="checkbox"/> Amendments not countersigned                     | <input type="checkbox"/> Other reason (please state below)        |

Name of Officer

\_\_\_\_\_

\_\_\_\_\_

|                              |      |
|------------------------------|------|
| Authorised Signature & Stamp | Date |
|------------------------------|------|