



## Refund Form

I, \_\_\_\_\_ provide my banking details to receive the refund from Indooroopilly Outside School Hours Care.

This refund is for (please tick):

- Bond refund (\$100 per child)
- Account credit
- Other (please list) \_\_\_\_\_

Student/s name: \_\_\_\_\_

<b>Amount:</b>			
<b>Bank Account Name:</b>			
<b>BSB:</b>		<b>Account Number:</b>	
<b>Notes:</b>			

NOTE: Please allow 5 - 10 business days for refund to be made.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY:

Date of Refund:		
Total Amount:		
Name and Signature:		