



SEPA Direct Debit Mandate

Unique Mandate Reference

Unique Mandate Reference (UMR) – to be completed by **Castleknock College**

By signing this mandate form, you authorise (A) **St. Vincent's Castleknock College** to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from **St. Vincent's Castleknock College**.

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 your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Please complete all the fields marked \*

Creditor's name	C   A   S   T   L   E   K   N   O   C   K     C   O   L   L   E   G   E
Creditor identifier	I   E   5   7   S   D   D   3   6   0   4   2   8
Creditor address	C   A   S   T   L   E   K   N   O   C   K
City	D   U   B   L   I   N
Post Code	1   5
Country	I   R   E   L   A   N   D

Type of payment \* Recurrent payment  One-off payment

Debtor Name *	
Debtor Address	
City	
Post Code	
Country	

Debtor account number – IBAN \*

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Debtor bank identifier code – BIC \*

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Date of signature \*

D   D   M   M   Y   Y
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Signature(s)

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Please sign here \*

Please return this mandate to the Accounts Department  
St. Vincent's Castleknock College, College Road, Dublin 15

