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|   EFT PAYMENT FORM  |

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| --- |
| **Personal Details:** |
| Name |  |
|   |
|  |
| **Banking Details:** |
| Account Name: |  |
| BSB: |  | Account No.: |  |
| Name of Bank: |  |
|  |
|  |
|   |
| Employee Signature: |  | Date: |  |  |  |
| Committee Signature: |   | Date: |  |  |  |