



EDUCATOR PAY DEDUCTION AUTHORISATION

Office Use Only: <input type="checkbox"/> Deduction entered in Harmony <input type="checkbox"/> Invoiced and receipted in Navision Staff Initial: _____ Date actioned ____/____/____

EDUCATOR DETAILS FDC IHC

First Name:	Surname:
ABN: _____ - _____ - _____ - _____	

DEDUCTION DETAILS

I authorise the YMCA WA Family Resource Centre to make the following deduction/s from my Child Care Subsidy payment.

Week Ending Date:	Total Amount:
Please tick the relevant box/s and insert amount of each item below:	
<input type="checkbox"/> Enrolment Pack (\$25)	\$ _____ Inv No: _____
<input type="checkbox"/> Attendance Pack (\$25)	\$ _____ Inv No: _____
<input type="checkbox"/> Service Membership I authorise YMCA WA to deduct the following amount each week until the balance is zero	\$ _____ Inv No: _____
<input type="checkbox"/> Service Levy	\$ _____ Inv No: _____
<input type="checkbox"/> Training I authorise YMCA WA to deduct the following amount each week until the balance is zero	\$ _____ Inv No: _____
<input type="checkbox"/> Other	\$ _____ Inv No: _____
Comments:	

Educator's Signature:	Date: ____/____/____
-----------------------	----------------------

OFFICE USE ONLY

Week Ending Date: ____/____/____	Total Amount Deducted: \$ _____
Service Staff Signature:	Date: ____/____/____