

MEMBER SERVICES

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0861 FAX THC (329 842) / +27 39 688 5005
assist@theholidayclub.co.za

COLLECTIONS

0861 THC PAY (842 729) / +27 39 688 5001
thcpay@theholidayclub.co.za

RESERVATIONS

0861 THC RES (842 737) / +27 39 688 5555
reservations@theholidayclub.co.za
www.theholidayclub.co.za

DEBIT ORDER / CREDIT CARD INSTRUCTION

Title	<input type="text"/>	Initials	<input type="text"/>	Full Name	<input type="text"/>
Street address	<input type="text"/>				
<input type="text"/>	<input type="text"/>	Town/City	<input type="text"/>	Postal code	<input type="text"/>
Telephone (code)	<input type="text"/>	No.	<input type="text"/>	Business (code)	<input type="text"/>
E-mail	<input type="text"/>			Cell No.	<input type="text"/>

I hereby authorise The Holiday Club or its nominee to debit the following bank account for the Accounts as set out below:

Bank	<input type="text"/>	Branch	<input type="text"/>
Branch No.	<input type="text"/>	Account No.	<input type="text"/>
Type of account	<input type="checkbox"/> Cheque	<input type="checkbox"/> Transmission	<input type="checkbox"/> Savings
Credit Card No.	<input type="text"/>	Expiry date	<input type="text"/>

INSTRUCTION AND AUTHORISATION

I hereby instruct and authorise Vacation Management Services (Pty) Limited (the 'Company'), or its nominee to debit the above bank / credit card account:

- ☐ with an amount of **R** on / / ; or
- ☐ on / / and thereafter on the same day each month with such amount as may be due by me each month;

Or, in relation to annual Membership and Reservation fees and/or iExchange, if so elected:

- ☐ **annually** in advance on / each year in respect of annual fees due for the following year or
- ☐ **monthly** in advance on the day of each month in respect of annual fees due for the following year

and to apportion and pay over the amount so debited, where applicable, to:

- TCT Leisure (PTY) Limited (the "Trading Company", or nominee)
- True Development Trading (Pty) Limited, or nominee
- The Leisure Property Trust Management Association (the "Association")
- iExchange;

Abbreviated short name to be used: VACATIONMG

ACKNOWLEDGEMENTS AND INSTRUCTIONS

I acknowledge that this authority is in accordance with the purchase, credit finance or rental agreement relating to my purchase of Points in The Holiday Club and will continue for as long as any monies are due in terms of the agreement.

I acknowledge that the Company is collecting monies due by me as agent of TCT Leisure (Pty) Limited, True Development Trading (Pty) Limited, the Association and iExchange Network.

In the event of any of my above accounts becoming fully paid up, then I acknowledge that my debit order will automatically be reduced accordingly.

I acknowledge that the instalment due in terms of the agreement attracts interest and other charges from time to time, and that, in the event of non-payment or changes in the interest rate, the debit authorised may be insufficient. I hereby authorise the Company to adjust my monthly debit to make up such shortfall.

I acknowledge that each withdrawal against my account shall be treated as though each had been signed by me personally. I understand that the withdrawal from my bank account/credit card will be processed by Bankserve magnetic tape service and that the details of each withdrawal will be reflected on my bank/credit card statement. I agree to pay all bank charges arising out of this authority.

If however, the date of the payment instruction falls on a non-processing day (weekend or public holiday) I agree that the payment instruction may be debited against my account on the following business day.

To allow for tracking of dates to match flow of Credit at no additional cost to myself. I authorise the originator to make use of the tracking facility as provided for in the EDO system at no additional cost to myself.

This authority may be cancelled by me giving 30 days written notice. I understand that I shall not be entitled to a refund on any monies withdrawn from my bank/credit card account whilst this authority is in force and if such amounts were legally owing.

Signed at _____ on this _____ day of _____

Account Number: _____

Authorised signature of Account Holder