CHILD DEVELOPMENT ACCOUNT (CDA)
INTERBANK GIRO APPLICATION FORM

Please **FILL IN** PART 1 of this form, **PRINT** it out, **SIGN** and **RETURN** to the Approved Institution.

PART 1: FOR TRUSTEE'S COMPLETION (FILL IN THE SPACES INDICATED WITH A *)

* Date (DD/MM/YYYY):	* Name Of Approved Institution ("AI"): NEWTON KINDERGARTEN
* To: Name Of Trustee:	* Child's Name (as in CDA):
* Mobile Number:	* Child's Birth Certificate:
* Home Number:	* Child's CDA Number:

(a) I/We hereby instruct you to process the AI's instructions to debit my/our account.

(b) You are entitled to reject the AI's debit instruction if my/our account does not have sufficient funds.

(c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the AI.

Trustee's Signature/Thumbprint**:

(As In Bank/Finance Company's Records)
**For thumbprints, please go to the branch with your identification.

PART 2: FOR APPROVED INSTITUTION'S COMPLETION

SWIFT BIC: 7339	Approved Institution's Account No.: 591455902001	Approved Institution's Customer Ref No.:
SWIFT BIC:	Account No. To Be Debited:	

PART 3: FOR BANK/FINANCE COMPANY'S COMPLETION

To: The Manager	(Name and Address of Approved Institution)

Attn:

This application is hereby REJECTED (please tick) for the following reason(s):

☐ Signature/Thumbprint⁴ differs from bank's/finance co's records
☐ Signature/Thumbprint⁴ incomplete/unclear⁴
☐ Account operated by signature/thumbprint⁴

☐ Wrong account number
☐ Amendments not countersigned by customer
☐ Others: _____

_____ Name Of Approving Officer

_____ Authorised Signature

_____ Date (DD/MM/YYYY)

⁴Please delete where inapplicable

Newton Kindergarten
纽顿幼稚园

16 Newton Road Singapore 307995   Tel: 62515586 Fax: 62512302
Email: newtonkindergarten@gmail.com   Website: www.newtonkindergarten.com

CHILD DEVELOPMENT ACCOUNT AUTHORIZATION FORM (CDA)
AUTHORIZATION FOR USING CDA FUNDS TO PAY SCHOOL FEES

1. Student's Particulars

Name of Child   : _____   Class / Level : _____

Birth Certificate No   : _____   Birth Order: 1 / 2 / 3 / 4

Citizenship   : Singaporean / Permanent Resident   Sex : M / F

2. Trustee's Particulars

Name of Parent   : _____   Contact No: _____

NRIC No   : _____   Citizenship: Singaporean / Permanent Resident

3. CDA Details

CDA belongs to the Student / Sibling

CDA No   : _____   Bank: _____

4. Use of Sibling's Account

Sibling's Name   : _____   Class / Level : _____

Birth Certificate No   : _____   Birth Order: 1 / 2 / 3 / 4

Citizenship   : Singaporean / Permanent Resident   Sex : M / F
(Please attach a copy of child's birth certificate if child is not a registered student in the kindergarten)

5. Authorization

I, (Name of Trustee) _____ of (NRIC No) _____

hereby authorize Newton Kindergarten to make deduction from my child's CDA in settlement of (Name of Student)

_____ fees.

I am fully aware that the deduction of CDA will take effect upon approval by the bank and I am also aware that
should my child's CDA have insufficient funds, I will need to pay the full amount in cash / cheque.

_____   _____   _____
Name of Trustee   Signature of Trustee   Date