

Change of Bank Account Form



**FREE REFORMED
SCHOOL ASSOCIATION**

My heart I offer to You Lord - promptly and sincerely

FOR THE ELECTRONIC DEPOSIT OF WAGES AND REFUND REQUESTS

New Bank: _____

BSB: _____ - _____ Account Number: _____

Name of new account: _____

Date new account is effective: _____

Signature: _____

Name: _____

Date: _____

Note:

Changes are to be forwarded to FRSA Administration at least one school week prior to the next pay date, since wages are processed in advance. (During school holidays you may need to allow more time).

Do not close your old bank account before you have received payments to your new one.

Email to: payroll@frsa.asn.au

OFFICE USE ONLY

Administration: _____
Signature _____ Date _____