



EDUCATOR BANK AUTHORISATION FORM

I give permission for
Queanbeyan-Palerang Family Day Care staff to deposit into my bank account
(details below) money which is Childcare Subsidy.

.....
Signature

.....
Date

ACCOUNT NAME: _____

BSB NUMBER: _____

ACCOUNT NUMBER: _____

BANK/CREDIT UNION: _____

BRANCH: _____



OFFICE
1 Farrer Pl, Queanbeyan

POSTAL
PO Box 90 Queanbeyan
NSW 2620

CONTACT
Ph: 02 62856253
Email: info.fdc@qprc.nsw.gov.au