

**Your Christmas Club  
Card Registration  
and Direct Debit Forms**

**NEW WORLD**



## Term and Conditions

1. The Initiator: (a) Has agreed to give advance notice of the net amount of each Direct Debit and the due date of the debiting at least 10 calendar days before (but not more than 2 calendar months) the date when the Direct Debit will be initiated. This advance notice must be provided either: (i) in writing; or (ii) by electronic mail where the Customer has provided prior written consent to the Initiator. The advance notice will include the following message: "Unless advice to the contrary is received from you by (date\*), the amount of \$ ..... , will be direct debited to your Bank account on (initiating date)." \*This date will at least two (2) days prior to the initiating date to allow for amendment of Direct Debits. (b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.

2. The Customer may: (a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator. (b) Stop

payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank. (c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of 1 (a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.

3. The customer acknowledges that: (a) This authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith not withstanding my/our death, bankruptcy or other revocation of this authority until actual notice of such event is received by the Bank. (b) In any event this authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account. (c) Any dispute as to the correctness or validity of an amount debited to my/our

account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this authority. Any other disputes lie between me/us and the Initiator. (d) Where the Bank has used reasonable care and skill in acting in accordance with this Authority, the Bank accepts no responsibility or liability in respect of: - the accuracy of information about Direct Debits on Bank statements - any variations between notices given by the Initiator and the amounts of Direct Debits. (e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.

4. The Bank may: (a) In its absolute discretion conclusively determine the order of priority payment by it of any monies pursuant to this or any other authority, cheque or draft properly executed by me/ us and given to or drawn on the Bank. (b) At any time terminate this Authority as to future payments by notice in writing to me/us. (c) Charge its current fees for this service in force from time-to-time.

**CHRISTMAS CLUB SIGNUP FORM.** Registration of your card is optional, but is required when arranging a Direct Debit.

**Card number** - From the back of your Christmas Club Card

0	2	5	6																	
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Which New World do you normally shop at?

Title:   M  F

First Name/s:

Surname:

Full Address:

Town/City: Postcode:

Daytime Phone:

Mobile Phone:

Email Address:

Yes, I wish to be contacted with promotional material.

What is your preferred method for us to contact you with promotional information:

text message  email  post

**Payment Details**

Only complete this section when arranging a Direct Debit

Payment amount \$  .

I want to make my payments every:

Week  Fortnight  Month

I would like my payments to be made at midnight on:

Monday  Tuesday  Wednesday  Thursday  Friday

I would prefer my first payment to be on:

We will write or email you to confirm the actual start date.

The following information is required for security purposes:

Date of Birth: DD / MM / YY

I have read and agree to the terms and conditions of the Christmas Club and verify the above information as correct:

Signed:

Date / /

**Privacy Statement** - We respect your privacy:

Information provided in this registration form will be held by Foodstuffs Christmas Club Ltd, Foodstuffs (Auckland) Ltd and their related New World franchises (together Foodstuffs). Information collected will be used by Foodstuffs, its agents and service providers for the purpose of administering and operating the Christmas Club. Foodstuffs may also use this information for the purposes of sending you relevant communications for future marketing, research purposes and promotional offers. By completing this registration form, you consent to the collection and disclosure of such information and use of that information for the purposes outlined above. You may, under the provisions of the Privacy Act 1993, request access to and correction of your personal information held by Foodstuffs.

Once completed, email this form to:  
[Xmasclub.solutions@foodstuffs.co.nz](mailto:Xmasclub.solutions@foodstuffs.co.nz)

Alternatively post to, Freepost 221509, PO Box 27480, Mt Roskill, Auckland 1440.

**Direct Debit Form** To enable a Direct Debit to be established you need to complete both the Direct Debit Form and the Card Registration Form above.

**Account Information** - Customer to complete this panel

Name of Account

Account Number Information:

<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Bank	Branch	Account Number	Suffix

I/We authorise you until further notice in writing to debit my/our account with you all amounts which Foodstuffs Christmas Club Ltd (hereinafter referred to as the Initiator), the registered initiator of the above authorisation code, may initiate by Direct Debit. I/We acknowledge and accept that the bank accepts this authority only upon the conditions listed on the reverse of this form.

**Authority to accept Direct Debits**  
(not to operate as an assignment or agreement)

**Authorisation Code**  
(User Number)

1 2 1 7 6 2 7

**To The Manager:**

Bank and Branch

Address (PO Box)

Town/City

Date / /

**Information to appear on my/our Bank Statement** - To be completed by customer.

Payer Particulars

XMAS CLUB

Payer Code

NEW WORLD

Payer Reference

0800NEWORLD

Authorised Customer Signature(s):

**This panel is for Bank use only**

Date received:

Approved

1762  
10/14

Recorded by:

Bank Stamp:

Checked by:

Please retain original at branch. Copy - Forward to Initiator if requested