

Registration Form

MEMBERSHIPS	COST	PAYMENT OPTIONS	
GROUP TRAINING			
Single unlimited weekly	\$50.00 per week	Direct debit (fortnightly)	<input type="checkbox"/>
10 session pass	\$210	Upfront	<input type="checkbox"/>
20 session pass	\$420 (+ 2 free sessions)	Upfront	<input type="checkbox"/>
FIT Membership	\$35.00 per week	Direct Debit (fortnightly)	<input type="checkbox"/>
PERSONAL TRAINING			
1-on-1 1 hour session 45 minute session 30 minute session	\$75 per session \$60 per session \$50 per session	Upfront - 10 Session Pass	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2-on-1 1 hour session 45 minute session 30 minute session	\$45 per person, per session \$40 per person, per session \$35 per person, per session	Upfront - 10 Session Pass	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3-on-1 1 hour session 45 minute session	\$40 per person, per session \$35 per person, per session	Upfront - 10 Session Pass	<input type="checkbox"/> <input type="checkbox"/>
Focus Groups 4-5 participants 1 hour session	\$30 per person per, session (\$20 for weekly group members)	Direct debit (fortnightly)	<input type="checkbox"/> <input type="checkbox"/>
KIDS TRAINING			
Juniors (age: 8-12) 10 session pass	\$150	Upfront	<input type="checkbox"/>
Teens (age: 13-17) 10 session pass	\$150	Upfront	<input type="checkbox"/>

TRAINING & NUTRITION PACKAGES	INCLUDES :	COST :	PAYMENT OPTIONS	
Group Training + Nutrition Pass	10/20 Group training sessions + 2 x nutrition consultations	\$340/\$550	Upfront	<input type="checkbox"/>
Personal Training + Nutrition Pass	10 PT sessions (45 minutes) + 2 x nutrition consultations	\$730	Upfront	<input type="checkbox"/>

NUTRITION CONSULTATIONS	
Initial: \$80.00 (including eating plan: \$120)	<input type="checkbox"/>
Follow up: \$65.00 (including revised eating plan: \$100)	<input type="checkbox"/>

Terms & Conditions:

Payments by direct debit (Weekly memberships)

- There is no joining fee for a Weekly Membership.
- There is no minimum term or commitment for a Weekly Membership.
- Direct debits are charged fortnightly on a Monday.
- To cancel a membership we require two weeks' notice before the date of cancellation.
- To suspend a weekly membership we require notice by 12:00pm Sunday before the week/s you wish for the suspension to commence.
- If notice is given for a week's suspension and the week has been paid for in advance, the next debit will be pushed back accordingly.
- Suspensions must be notified via phone call (0439619201) or email (info@thelinkedstudio.com.au)
- Suspensions are only granted for full weeks.
- There is no limit to the number of weeks of suspension.
- Direct debits during a closure period at Linked – Training and Nutrition will not be charged.

Focus Groups:

- 24 hours notice is required for cancellations, otherwise the session is forfeited.
- If a session has been paid for in advance but 24hours notice is given for a cancelation, the cost for that session will be applied as credit to the next scheduled payment.
- If one member of the group wishes to cancel a session the arrangement for the others members of the group will be confirmed with the trainer upon registration.

Upfront payments (10/20 session passes)

- Passes have a 6 month expiry from the date of the first session attended.
- Passes are not refundable.
- Passes are transferable to a non-linked member.
- Any free sessions included in the pass will be forfeited if payment is not received within two weeks.

Personal Training

- 24 hours notice is required for cancellations, otherwise the session is forfeited.

Nutrition Programs & Consultations

- Nutrition Programs are non-refundable from the 3rd day of the program onwards.
- Nutrition Consultations must be cancelled with 24 hours notice or a 50% cancellation fee will apply.



Linked - Training and Nutrition



ACN 096 902 813 | AFSL 315388

Mob: 0439 619 201

DIRECT DEBIT REQUEST

NEW CUSTOMER FORM

YOUR DETAILS | Please complete this form using a BLACK PEN, * Indicates a MANDATORY FIELD

Business: J.G GEDDES & S.P WEARNE ABN/ACN: 50 851 274 647 **LTAN GEN 57741**

Customer Reference:

*Surname: *Given Name:

*Mobile #:

* Email:

*Address:

*Suburb: *State: *Postcode:

DEBIT ARRANGEMENT | Including payment details and associated fees/charges detailed below and/or the total amount billed for the specified period for this and any other subsequent agreements or amendments between me/us and the Business and/or Ezidebit

Session Pass (upfront) Debits On Date: / / Debit this amount: \$

D D / M M / Y Y

*All session pass members are sent a reminder with 2 sessions remaining to confirm if they are happy to renew their pass. Attendance beyond 10 sessions (10 session pass) or 22 sessions (20 session pass) without confirmation will mean an automatic renewal of your pass.

Weekly Membership Debit Starting on Date: / / Debit this amount: \$

D D / M M / Y Y

*All weekly memberships are debited fortnightly on a Monday and continue until 2 weeks' notice of cancellation or changing memberships.

Administration Fee (once only): Paid By Business | Bank Account Transaction Fee: Paid By Business | Credit Card Transaction Fee: VISA/MasterCard: 1.79% (Min \$0.80) | AMEX/Diners: 4.4% (Min \$0.80)

CHOOSE YOUR PAYMENT METHOD

Debit from Credit Card (On your statement debits will show up as EZIDEBIT HEALTH & FITNESS MB)

VISA MasterCard

Card Number: Expiry Date: /

M M / Y Y

Name of Cardholder:

By signing this form, I/we authorise Ezidebit, acting on behalf of the Business, to debit payments from my specified Credit Card above, and I/we acknowledge that Ezidebit will appear as the merchant on my credit card statement.

Debit from Bank, Building Society or Credit Union Account (On your statement debits will show up as LINKED)

Financial Institution: Branch:

BSB Number: Account Number:

Account Holder Name:

I/We authorise Ezidebit Pty Ltd ACN 096 902 813 (User ID No 165969, 303909, 301203, 234040, 234072, 428198) to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance with the Debit Arrangement stated above and this Direct Debit Request and as per the Ezidebit DDR Service Agreement (Ver 1.8) provided.

This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request, the provided Ezidebit DDR Service Agreement (Ver 1.8) and I/we have read and understand same. I/We acknowledge that our personal information will be collected, used, held and disclosed in accordance with the Ezidebit Privacy Policy found at <http://www.ezidebit.com.au/privacy-policy/>

Signature(s) of Nominated Account: PLEASE PRINT AND SIGN FORM NOT VALID UNLESS SIGNED

Date: / /

D D / M M / Y Y



ACN 096 902 813 | AFSL 315388

DDR SERVICE AGREEMENT (Ver 1.8)

DDR Service Agreement (Ver 1.8)

I/We hereby authorise Ezidebit Pty Ltd ACN 096 902 813 (Direct Debit User ID number 165969, 303909, 301203, 234040, 234072, 428198) (herein referred to as "Ezidebit") to make periodic debits on behalf of the "Business" as indicated on the attached Direct Debit Request (herein referred to as "the Business").

I/We acknowledge that Ezidebit is acting as a Direct Debit Agent for the Business and that Ezidebit does not provide any goods or services (other than the direct debit collection services to me/us for the Business pursuant to the Direct Debit Request and this DDR Service Agreement) and has no express or implied liability in regards to the goods and services provided by the Business or the terms and conditions of any agreement that I/We have with the Business.

I/We acknowledge that the debit amount will be debited from my/our account according to the terms and conditions of my/our agreement with the Business and the terms and conditions of the Direct Debit Request (and specifically the Debit Arrangement and the Fees/Charges detailed in the Direct Debit Request) and this DDR Service Agreement.

I/We acknowledge that bank account and/or credit card details have been verified against a recent bank statement to ensure accuracy of the details provided and I/we will contact my/our financial institution if I/we are uncertain of the accuracy of these details.

I/We acknowledge that it is my/our responsibility to ensure that there are sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honoured on the debit date. Direct debits normally occur overnight, however transactions can take up to three (3) business days depending on the financial institution. Accordingly, I/we acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available, I/we agree that Ezidebit will not be held responsible for any fees and charges that may be charged by either my/our or its financial institution.

I/We acknowledge that there may be a delay in processing the debit if:-

- (1) there is a public or bank holiday on the day of the debit, or any day after the debit date;
 - (2) a payment request is received by Ezidebit on a day that is not a banking business day in Queensland;
 - (3) a payment request is received after normal Ezidebit cut off times, being 3:00pm Queensland time, Monday to Friday.
- Any payments that fall due on any of the above will be processed on the next business day.

I/We authorise Ezidebit to vary the amount of the payments from time to time as may be agreed by me/us and the Business as provided for within my/our agreement with the Business. I/We authorise Ezidebit to vary the amount of the payments upon receiving instructions from the Business of the agreed variations. I/We do not require Ezidebit to notify me/us of such variations to the debit amount.

I/We acknowledge that Ezidebit is to provide at least 14 days' notice if it proposes to vary any of the terms and conditions of the Direct Debit Request or this DDR Service Agreement including varying any of the terms of the debit arrangements between us.

I/We acknowledge that I/we will contact the Business if I/we wish to alter or defer any of the debit arrangements.

I/We acknowledge that any request by me/us to stop or cancel the debit arrangements will be directed to the Business.

I/We acknowledge that any disputed debit payments will be directed to the Business and/or Ezidebit. If no resolution is forthcoming, I/we agree to contact my/our financial institution.

I/We acknowledge that if a debit is returned by my/our financial institution as unpaid, a failed payment fee of up to \$11.90 is payable by me/us to Ezidebit. I/We will also be responsible for any fees and charges applied by my/our financial institution for each unsuccessful debit attempt together with any collection fees, including but not limited to any solicitor fees and/or collection agent fee as may be incurred by Ezidebit.

I/We authorise Ezidebit to attempt to re-process any unsuccessful payments as advised by the Business.

I/We acknowledge that certain fees and charges (including setup, variation, SMS or processing fees) may apply to the Direct Debit Request and may be payable to Ezidebit and subject to my/our agreement with the Business agree to pay those fees and charges to Ezidebit.

Credit Card Payments

I/We acknowledge that "Ezidebit" will appear as the merchant for all payments from my/our credit card. I/We acknowledge and agree that Ezidebit will not be held liable for any disputed transactions resulting in the non supply of goods and/or services and that all disputes will be directed to the Business as Ezidebit is acting only as a Direct Debit Agent for the Business.

I/We acknowledge that Credit Card Fees are a minimum of the Transaction Fee or the Credit Card Fee, whichever is greater as detailed on the Direct Debit Request.

I/We appoint Ezidebit as my/our exclusive agent with regard to the control, management and protection of my/our personal information (relating to the Business and contained in this DDR Service Agreement). I/We irrevocably authorise Ezidebit to take all necessary action (which Ezidebit deems necessary) to protect and/or correct, if required, my/our personal information, including (but not limited to) correcting account numbers and providing such information to relevant third parties and otherwise disclosing or allowing access to my/our personal information to third parties in accordance with the Ezidebit Privacy Policy.

Other than as provided in this Agreement or the Ezidebit Privacy Policy, Ezidebit will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made relating to an alleged incorrect or wrongful debit, to be referred to a debt collection agency for the purposes of debt collection or as otherwise required or permitted by law. Ezidebit's Privacy Policy can be found at <http://www.ezidebit.com/au/privacy-policy/>

I/We hereby irrevocably authorise, direct and instruct any third party who holds/stores my/our personal information (relating to the Business and contained in this DDR Service Agreement) to release and provide such information to Ezidebit on my/our written request.

I/We authorise:

- a) Ezidebit to verify and/or correct, if necessary, details of my/our account with my/our financial institution; and
- b) my/our financial institution to release information allowing Ezidebit to verify my/our account details.

Po Box 3327
Newstead, QLD 4006
Ph: (07) 3124 5500 Fax: (07) 3124 5555

DDR Service Agreement (Ver 1.8)