

S.C. _/ _/ _ _/ _ _ _/ _ _ _/ _ _ _

ABOUT YOU

COMPLETE NAME

Last First Middle (in full)

Name to appear on the card (limited to 21 characters only, including spaces)

BIRTHDATE (must be between 21 to 65 years old) SEX Male Female CIVIL STATUS Single Married Separated Widowed CITIZENSHIP

HOME PHONE NO. FAX NO. CELLPHONE NO. TIN NO.

EMAIL ADDRESS

MOTHER'S FULL MAIDEN NAME

Last First Middle (in full)

HOME ADDRESS (all fields must be filled up properly)

House No. & Street

Subdivision/Barangay

Town/Municipality

City/Province Zip Code

PERMANENT ADDRESS

HOME OWNERSHIP ____ Years ____ Months of Stay Owned (not mortgaged) Owned (mortgaged) Living with Parents/Relatives Rented

NO. OF DEPENDENT CHILDREN

DO YOU OWN A CAR? No Yes How many? ____ Not Mortgaged Mortgaged

EDUCATIONAL ATTAINMENT High School Some College College Post-Graduate

EMPLOYMENT Private Sector Self-employed Government Retired

NAME OF COMPANY

ADDRESS (all fields must be filled up property)

Department Telephone No.

Floor and Building

No. and Street

Subdivision/Barangay

Town/Municipality

City/Province Zip Code

____ Years ____ Months of Stay (with Present Company/Business)

____ Years ____ Months of Stay (with Previous Company/Business)

NATURE OF BUSINESS

OCCUPATION POSITION

TOTAL GROSS ANNUAL INCOME OTHERS/NON FIXED INCOME

BASIC P _____ per annum P _____

PREFERRED BILLING ADDRESS (your Card & Monthly Statements will be delivered here)

HOME OFFICE

NO. OF OTHER CREDIT CARDS (non-Bankard) 1 2 More than 2

Card Issuer	Card Number	Credit Limit	Issue Date

EXTENSION CARD/S (for immediate family members, friends and relatives; 13-65 years old)

COMPLETE NAME

Last First Middle (in full)

Name to appear on the card (limited to 21 characters only, including spaces)

BIRTHDATE TELEPHONE NO. RELATIONSHIP SEX Male Female

Signature of Extension Cardholder no.1

COMPLETE NAME

Last First Middle (in full)

Name to appear on the card (limited to 21 characters only, including spaces)

BIRTHDATE TELEPHONE NO. RELATIONSHIP SEX Male Female

Signature of Extension Cardholder no.2

FEES INFORMATION (subject to change upon prior notice)

ANNUAL FEES

Principal - P 3,600 *Extension - P 1,800

* FREE-FOR-LIFE ANNUAL MEMBERSHIP FOR EXTENSION CARDS (maximum of 5)

NO PROCESSING FEE REQUIRED. PLEASE DO NOT ENCLOSE PAYMENT. APPLICABLE FEES WILL BE BILLED UPON APPROVAL OF APPLICATION.

YOUR SIGNATURE

All information given in this application form is true, correct and complete. By signing below, I/We authorize Bankard, Inc. to make any credit investigation to evaluate or verify all information, including financial standing or employment. I/We understand that falsification and/or giving false information in this application, and/or supporting documents submitted, shall be grounds for the rejection of my/our application, immediate termination of my/our credit card privileges, once approved, and/or legal action against me/us. Bankard, Inc. shall have no obligation to provide the reason for rejection of the application. By signing at the back of the card/s, and/or using the card/s, I/We accept the terms and conditions of membership, including any amendments thereto.

Applicant's Signature

Date