

Diners Club / Jack's Place Cobrand Credit Card Application Form

1 yr FOC
Apply by 31 Mar 2012

YES! I wish to apply for a (please tick **ONE** only):

- (a) **Cobrand Credit Card** (Min. income of \$30,000 p.a. required); or
 (b) **Cobrand S\$500 Limit Card** (Min. income of \$16,000 p.a.; except for students & NSF's)

Are you an existing Jack's Place Member? YES NO

WJP6

My Personal Details

FULL NAME AS IN NRIC (Please underline SURNAME)

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DATE OF BIRTH: / / IC / PASSPORT NO.: / / GENDER: Male Female No. of Dependents: _____

NATIONALITY: MARITAL STATUS: RACE: ACADEMIC QUALIFICATIONS:

LOCAL HOME ADDRESS: _____

HANDPHONE (MANDATORY): HOME PHONE: RESIDENCE: Own Rented Mortgaged Parent's / Relatives' Years of Stay: _____

E-MAIL (MANDATORY if available): _____

*PLEASE EMBOSS MY NAME AS FOLLOWS (MAX. 23 SPACES & INCLUDE INITIALS OF FULL NAME):

*The proposed embossed name may be altered to comply with Diners Club's card embossing specifications.

PLEASE SEND MY BILLING STATEMENT TO:
 MY HOME MY OFFICE OR _____

NAME OF CLOSEST RELATIVE / FRIEND NOT LIVING WITH ME: TEL: _____

My Spouse (Married applicant to complete)

SPOUSE'S FULL NAME AS IN IC/PASSPORT (Please underline SURNAME): HANDPHONE (MANDATORY): _____

DATE OF BIRTH: / / IC / PASSPORT NO.: / / GROSS ANNUAL INCOME \$: _____

NAME OF EMPLOYER: POSITION HELD: _____

My Education (Student applicant to complete)

EDUCATIONAL INSTITUTE: NUS NTU SMU SIM INSEAD NAFA Lasalle-SIA Singapore Polytechnic Ngee Ann Polytechnic Temasek Polytechnic Nanyang Polytechnic Republic Polytechnic Others: _____

LENGTH OF COURSE: _____ CURRENTLY STUDYING IN _____ YEAR

My Employment (Non-Student applicant to complete)

NAME OF COMPANY: I AM SELF-EMPLOYED

COMPANY ADDRESS: _____

OFFICE TEL: POSITION HELD: DATE JOINED: GROSS ANNUAL INCOME \$: _____

My Financial Particulars (Credit Card applicant to complete)

I HOLD THE FOLLOWING CREDIT/CHARGE CARDS:

- A/C NO.:
- A/C NO.:

MY BANK: BRANCH: TYPE OF A/C: A/C NO.:

I HAVE NEVER HELD A DINERS CLUB CARD BEFORE
 I HAVE HELD A DINERS CLUB CARD BEFORE. MY CARD A/C NO.: _____

FOR FOREIGNERS: OVERSEAS HOME ADDRESS: _____

IMPORTANT: Document Submission

- For COBRAND REGULAR CREDIT CARD applicant, please attach:**
- Photocopy of Front & Back of NRIC / Passport
 - Latest Income Tax Assessment, IR8A, Computerized Payslip or Letter from Employer
 - For Foreigners:** Please attach a copy of Employment Pass (min. 6-month validity)
- For COBRAND S\$500 LIMIT CREDIT CARD applicant, please attach:**
- Photocopy of Front & Back of NRIC
 - Latest Income Tax Assessment, IR8A, Computerized Payslip or Letter from Employer
 - For Students:** Front & Back of Student ID Card e.g. Student or Matriculation Card
 - For applicant age below 21:** Front & Back of Applicant's NRIC AND Parent's / Guardian's NRIC. (The addresses on both applicant's & parent's / guardian's NRIC must match)

FOR DINERS CLUB USE ONLY

CR	CH	TC	APP
ST	DATE		DATE

My Supplementary Card - For Regular Credit Card Application Only

For my Spouse or Other Family Member ABOVE 18 YEARS OF AGE

FULL NAME AS IN IC/PASSPORT (Please underline SURNAME): RELATIONSHIP: _____

ADDRESS (if different from Basic Card applicant): _____

TEL: DATE OF BIRTH: / / GENDER: Male Female IC/PASSPORT NO.: / /

NATIONALITY: NAME OF EMPLOYER: _____

POSITION HELD: OFFICE TEL: GROSS ANNUAL INCOME \$: _____

PLEASE EMBOSS MY NAME AS FOLLOWS (MAX. 23 SPACES & INCLUDE INITIALS OF FULL NAME):

*The proposed embossed name may be altered to comply with Diners Club's card embossing specifications.

Declaration - Please read before signing

- By signing below, "I/we
- herby request Diners Club (Singapore) Pte. Ltd. (DCS) to open a Cobrand Card Account (Card Account) for me/us and to issue Diners Club/Jack's Place Cobrand Credit Card(s) (the Card) (including renewal Card(s)) until the Card Account is terminated. For joint card application, we agree that the Card Account shall be opened in the name of the first signatory (termed Basic Card Applicant for administrative purpose) and the second/other signatory shall be the Supplementary Card applicant.
 - herby authorise DCS and/or its representatives to contact my/our bankers or any other source to obtain and verify any information about me/us as DCS deems fit in DCS's absolute discretion and consent to DCS's disclosure of information relating to me/us and my/our use of the Card(s) at DCS's discretion to any of DCS's franchisees worldwide or to any third party as DCS deems fit, including but not limited to any credit bureau of which DCS is a member or subscriber and/or to any other members, subscriber and/or compliance committee of such credit bureau and to any other person to whom disclosure is permitted or required by any statutory provision or law.
 - (a) am/are aware that if DCS approve the application made herein, the Card(s) will be issued by DCS subject to DCS's terms and conditions indicated herein and to its other terms and conditions for issuance of credit cards; (b) am/are aware that the terms and conditions of issuance of credit cards can be inspected at DCS's office and a copy will be despatched to me/us with the Card(s) and I/we agree to be bound by them upon receipt or acceptance of or signing on or use of the Card(s) unless the Card(s), cut into half, is/are returned to DCS.
 - am aware and agree that if the Card application is made under above-stated box (b), the Card will have a credit limit of S\$500 only and known as Cobrand S\$500 Limit Card for administrative purpose and cannot have a supplementary card annexed to it.
 - agree that the Card(s) may be sent to me/us at my/our risk by ordinary mail to my/our billing address.
 - consent to DCS and/or Jack's Place using at their absolute discretion my/our information provided herein for marketing purposes with their selected business partners.
 - agree that the Basic Card Applicant is and shall be responsible for all charges/liabilities (including Annual Fees or any other fees/charges) which may arise out or be incurred in respect of the Basic Card and all Supplementary Card(s) issued at the Basic Card Applicant's request (if any) and each Supplementary Card Applicant is and shall be responsible for all charges/liabilities (including Annual Fees or any other fees/charges) which may arise out or be incurred in respect of the Supplementary Card.
 - confirm that at the time of this application, I am/we are not under the Debt Repayment Scheme or undischarged bankrupt and no statutory Demand nor any legal action process has been served on me/us.
 - authorise DCS, if this application is or is purported to be given or sent by me/us to DCS by facsimile transmission, to rely on and process this application in accordance with the faxed copy of the form, though DCS is not obliged to do so, without waiting for the original signed form. I/We will submit to DCS the original signed form even though the Credit Card(s) had been issued in accordance with the faxed copy if DCS requests for the original form.
 - herby warrant that the information given herein and all documents (if any) submitted are true and correct.
 - agree that DCS may decline this application at its sole discretion without assigning any reason.
 - FOR APPLICANTS OF COBRAND S\$500 LIMIT CARD BELOW 21 YEARS OLD** at the time of application, I agree that upon reaching 21 years of age, if the Card Account opened for me is not cancelled, my continued maintenance of my Card Account and/or continued use of the Card shall be construed and interpreted as my ratification of this application under the terms indicated herein and subject to DCS's terms and conditions of issuance of the Card without any requirement on my part to re-apply for the Card Account and/or the Card and/or to do any whatsoever act to re-accept the terms and conditions of this Agreement.

PLEASE SIGN AS YOU WOULD FOR ALL FUTURE TRANSACTIONS :-

Signature of *Basic Card / S\$500 Limit Card Applicant & Date: _____

Signature of Supplementary Card Applicant & Date (Not applicable for S\$500 Limit Card Applicant): _____

*Please delete where appropriate

Parent's/Guardian's Agreement

COMPULSORY if S\$500 Limit Card applicant's age is below 21

~ The addresses on both applicant's & parent's / guardian's NRIC must match

NAME OF PARENT / GUARDIAN	RELATIONSHIP
NRIC NO.	HOME PHONE
	HANDPHONE

- By signing below, I, the Applicant's parent / guardian, hereby
- consent and agree to Diners Club (Singapore) Pte. Ltd. (DCS) opening the Cobrand Card Account (Card Account) and issuing a Diners Club/Jack's Place Cobrand Credit Card (the Card) to the Applicant thereunder until the Card Account is terminated subject to the terms of application herein and to DCS's Credit Card terms and conditions;
 - give DCS my unconditional, irrevocable and continued guarantee for the due and punctual payment and/or performance by the Applicant of all sums and/or other liabilities or obligations due and owing by or from the Applicant to DCS arising from and/or in relation to the Card Account in consideration of DCS opening the Card Account for and issuing the Card to the Applicant;
 - unconditionally and irrevocably undertake and agree and guarantee to pay DCS and/or perform all such sums and/or other liabilities and obligations and/or indemnify DCS against all losses arising from and in relation to the Card Account if for any whatsoever reasons the Applicant fails to pay any/all sums or perform any/all the liabilities and obligations arising from and/or in relation to the Card Account.

Signature of Parent's / Guardian's & Date: _____

NOTE: Diners Club reserves the right to credit check an applicant without reference, and to reject an application without assigning any reasons therefor. Your signatures in this form and on your Diners Club Card should be identical. You will be bound by the terms and conditions in this form even if your signatures differ.

Cobrand Partner:

Participating Brands:



Please send-in your completed Application Form using the Business Reply Folder on the next page >>>

Diners Club (Singapore) Pte. Ltd. Co. Reg. No.: 197300502W

THANK YOU for applying for the Diners Club Card.

Please send us your application with this prepaid Business Reply Folder.

1. Fold along the dotted lines;
2. Put in your Application Form **together** with the required documents into this folder;
3. Glue or tape the edges of this folder;
4. Mail this folder at your nearest post box.

NO STAMPS REQUIRED



BUSINESS REPLY SERVICE
PERMIT NO. 00429



DINERS CLUB (SINGAPORE) PTE. LTD.
ORCHARD P.O. BOX 15
SINGAPORE 912301
REPUBLIC OF SINGAPORE

Postage will be
paid by
addressee.
For posting in
Singapore and
Malaysia only.