



AMERICAN EXPRESS® CORPORATE CARD

Corporate Card_UK_Third Party_Form_March 2022

Third Party Authorisation Form

Please tick all boxes that apply:

Corporate Card Account

I authorise my nominee to be able to discuss my Corporate Card Account details with American Express.

I also authorise my nominee to be able to perform Account tasks such as address changes, order copies of statements, request a new Card and query unrecognised transactions.

Individual Membership Rewards® Account (excludes Company level reward schemes)

You can only appoint a nominee for Membership Rewards matters if you are entitled to redeem points yourself. (If you are a Programme Administrator for your company, please note that you cannot use this form to delegate your authority.)

I authorise my nominee to be able to discuss my Membership Rewards account details with American Express.

I also authorise my nominee to redeem Membership Rewards Points on my behalf.

Card Account Number:

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Cardmember's Name:

Business Registered Name:

Work Telephone Number:

Nominee's Name:
(Nominee must also work for the Business stated above)

Nominee's password:

Nominee's Work Telephone Number:

Nominee's Date of birth:
(This will only be used for security purposes)

D D M M Y Y

I confirm that I am an employee of the above stated business and agree for the details stated on this form to be shared with that business. Your information will be used in line with American Express's Privacy Statement. For information on how American Express will use your personal data, please visit: <https://www.americanexpress.com/uk/legal/online-privacy-statement.html>

Nominee's Signature

X

D D M M Y Y

Declaration

Important

I authorise the nominee named on this form to the extent indicated by the tick boxes above. I understand and accept full responsibility for such authorisations and discharge American Express from any liability relating to any actions made by the nominee.

Cardmember's Signature

X

D D M M Y Y

If you have a previous nominee who you would like removed from the Account please fill in their name(s) below:

Once completed, please return this form using any method listed below:

Upload it to americanexpress.com/uk/documentcentre

Fax to 01273 664 234

Post to American Express Services Europe Ltd, 1 John Street, Brighton, BN88 1NH

Email it to your American Express Programme Administrator to forward on your behalf.