THE AMERICAN EXPRESS AIRPOINTS ADDITIONAL CARD APPLICATION FORM

To apply for an Additional Card, please submit your completed application via one of the following:

newaccountsnz@aexp.com If you prefer email, you should send it securely.

Freepost 1588, American Express International (NZ), Inc.,
PO Box 2285, Shortland Street, Auckland 1140 **OR** fax to 0800 372 458

Basic Card Member's Name SC: 7D00000083

Surname

First Name Middle Initial

My American Express Card number is

3 7 7 4

Date of Birth D D / M M / Y Y

Additional Card Member Details

The Basic Card Member has known the Additional Card Member for:

☐ 6-12 Months ☐ 12 Months or more

Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Surname

First Name Middle Initial

Relationship to Basic Card Member

Home Address

Postcode Mobile Phone No.

Name to appear on Additional Card

Date of Birth D D / M M / Y Y

Additional Card Members must be 18 years of age or over.

Confirmation of Identity

For your security and to meet legal requirements, we need to verify the identity of all Card Members. To assist in this process we require the Additional Card Member's NZ Driver's Licence if held.

NZ Driver's Licence No.

(Licence/5a Field) (Version/5b Field)

Note: The Additional Card Member's NZ Driver's Licence No. will be verified with the NZTA for confirmation of identity. Please note, American Express may need to contact you to obtain additional information to verify their identity.

The Basic Card Member must read and sign the declaration on the right, then submit the completed application via the email address, postal address or fax number above.

Declaration
Important: The Basic Card Member must read the information and sign below.
TO AMERICAN EXPRESS INTERNATIONAL (NZ), INC.:

1. Basic Card Member

You request American Express to issue the Additional Card(s) specified in the application, and you declare that:

- The information you have given on this application is true and complete and you authorise American Express to check that information. You acknowledge that American Express relies on this information to consider this application;
- You are financially solvent and able to pay all your debts as they fall due;
- You understand and agree that you will be liable for all charges on the Additional Card(s). This includes charges incurred at any time until each Card is cut in half and returned to American Express and no longer used; and
- American Express may produce this application or a copy or other reproduction of it as evidence of this application for the Additional Card(s) and your agreement to this Declaration.

2. Additional Card Member

Authority to American Express International (NZ), Inc. under the Privacy Act:

You agree that where you have provided American Express with information about another individual in this application form, you will make sure that the individual has seen, understood and agreed to:

- your supplying their information to American Express and the purposes for which American Express has collected the information;
- American Express and their agents verifying with the NZTA, their driver's licence information provided by you;
- their ability to access that information in accordance with the Privacy Act (and to advise American Express if they think the information is inaccurate, incomplete or out of date); and
- the contact details of American Express' Privacy Officer.

Signature of Basic Card Member

✗ Date / /

By signing above I certify that I have read and agreed to the above declaration with respect to Additional Card Membership.

www.americanexpress.co.nz

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