THE AMERICAN EXPRESS PLATINUM MEMBERSHIP REWARDS® ADDITIONAL CREDIT CARD APPLICATION FORM

CLEAR FORM

To apply for an Additional Card, please complete all fields in BLOCK CAPITALS and submit your completed application via one of the following:

Secure email to newaccountsnz@aexp.com.

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

DOWNLOAD PDF BEFORE COMPLETING OR ALL CHANGES WILL BE LOST.

Basic Card Member's Details SC: 7D00000113

Surname

First Name Middle Initial

Your American Express Card number

Date of Birth D D / M M / Y Y

Additional Card Member's Details

Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Surname

First Name Middle Initial

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 the declaration on the right, then submit the completed application via the email address, postal address or fax number above.

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

1. Request for Additional Card

You request American Express to issue the Additional Card 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).
- American Express may produce this application or a copy or other reproduction of it as evidence of this application for the Additional Card and your agreement to this Declaration.

2. Provision and use of Additional Card Member Information

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 the Additional Card Member's identity with the NZTA or a credit reporting bureau, using the information provided by you including their drivers licence information;
- 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.

3. Contacting American Express' Privacy Officer

In accordance with the Privacy Act, you can access personal information about you held by American Express and advise if you think it is inaccurate, incomplete or out of date. To arrange access to personal information held by American Express about you, or enquire generally about privacy matters, write to – the Privacy Officer, American Express International (NZ), Inc., PO Box 4005, Auckland.

Declaration By completing and submitting this Additional Card application, you certify that you have read and agreed to the above declaration with respect to this Additional Card application.

Date D D / M M / Y Y

For Office Use Only

ATI: NZA54	SPID: 1SP	Cnty: 554	Fee: 2