

BRITISH AIRWAYS AMERICAN EXPRESS® BUSINESS TRAVEL ACCOUNT

Business Travel Account Application Form

Please complete this application **ON YOUR COMPUTER**. If more than one person needs to complete this application please save it and forward it electronically. If you cannot complete it on screen you may print this application and complete it in **CAPITALS** with black ink. All fields **MUST BE** completed in order for this application to be processed (unless otherwise stated). For the purposes of this application all references to "business" means the relevant company or firm on behalf of which you are completing this application.

1. Business Information

Business Travel Account setup requirement:	<input type="checkbox"/> Set up New Funding Account (BTA)
	<input type="checkbox"/> Add Dynamic Virtual Account (DVAN) to my existing Funding Account (BTA)
	If unsure, please contact your American Express representative.
Has the applying business completed a Company Account Application Form for a Business Travel Account within the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, please ensure you also complete a new Company Account Application form as well as completing this form.
Change of Beneficial Owner:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Change of registered Director or Managing Partner or Trustee or governing body member:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Change of Registered Company Address:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If you have answered yes to any of the three ownership or management changes above, please ensure you also complete a new Company Account Application form as well as completing this form.
Business Registered Name (do not abbreviate):	<input type="text"/>
Business Registered Address (do not abbreviate):	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode:	<input type="text"/>
	Country: <input type="text"/>
Annual Business Turnover:	£ <input type="text"/>
Business Registration Number:	<input type="text"/>
Master Account Number:	<input type="text"/> - <input type="text"/> - <input type="text"/> If you do not know the existing Master Account Number please contact your American Express representative.
Funding Account (BTA) Name:	<input type="text"/>
Estimated Annual Spend:	£ <input type="text"/>

2. Travel Booking Provider Information (i.e. Travel Agent or Travel Management Company)

Travel Booking Provider Name:	<input type="text"/>
	Contact details for Travel Booking Provider
Title:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="text"/>
Contact's First Name(s):	<input type="text"/>
Contact's Last Name:	<input type="text"/>
Address:	<input type="text"/>
	<input type="text"/>
Postcode:	<input type="text"/>
	Country: <input type="text"/>
Telephone Number (inc. country & area codes):	<input type="text"/>
Email Address:	<input type="text"/>

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3. Virtual Account Number setup requirements

Do you want to set up:

- ☐ 1) Lodged (LVAN) Virtual Account only
☐ 2) Both Lodged (LVAN) and Dynamic (DVAN) Virtual Accounts
☐ 3) Dynamic (DVAN) Virtual Account only linked to your existing BTA

4. BTA Facilitator Information (if any are involved in the Programme setup)

The Business as named in section 1 elects to use Conferma Limited as BTA Facilitator. Please tick as appropriate.

Yes ☐ No ☐

Conferma Ltd
 5 Brooks Drive
 Cheadle Royal Business Park
 Cheadle
 SK8 3TD
 United Kingdom

5. Programme Administrator's Details

If the Programme Administrator is an existing Online Services user, please provide their user ID (if known):

☐ If the Programme Administrator is the same as the person nominated on the Company Application Form, or currently acting as a Programme Administrator on your existing BTA, please tick here.

If you wish to nominate a new Programme Administrator please complete a Programme Administrator enrolment form.

6. Statement Frequency & Date - Optional

If you are an existing BTA Client and want to keep your existing statement frequency and details, please leave this section blank. Otherwise, please tick the relevant box and advise date or day where appropriate

Monthly Statement (recommended):

☐ Please specify date

Weekly Statement:

☐ Please specify day

Bi-Weekly Statement:

(choose the date in the month you wish to pay)

☐ 1ST & 3RD weeks ☐ or 2ND & 4TH weeks Please specify day

Billing Support File:

(an electronic file for your expense or payment system)

☐ Yes ☐ No (If "yes" please contact your American Express representative to set this up)

Payment Method:

☐ Direct Debit ☐ BACS (Please refer to the UK Payment Guide which can be provided by your American Express representative)

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7. Statement Reference – Optional

Customer Supplied References

Customer references may be used by a business to help identify individual transactions on your Business Travel Account Statement.

Example References

Reference Fields	Customer's Internal Reference Description	Preferred Format (A for Alpha and/or N for Numeric)	Mandatory Capture Yes/No
Ref. 1 (Max 9 characters)	Cost Centre	E.G. if reference has 6 characters AANNNN	Yes

Please complete this section with guidance from your Travel Booking Provider and your American Express representative. The number of reference fields available to your business will depend on your Travel Booking Provider. Up to 4 reference fields will be shown on your PDF statement. All 7 references will be reflected on your electronic files.

References Required

Reference Fields	Customer's Internal Reference Description	Preferred Format (A for Alpha and/or N for Numeric)	Mandatory Capture Yes/No
Ref. 1 (Max 9 characters)			
Ref. 2 (Max 24 characters)			
Ref. 3 (Max 10 characters)			
Ref. 4 (Max 10 characters)			
Ref. 5 (Max 15 characters)			
Ref. 6 (Max 5 characters)			
Ref. 7 (Max 10 characters)			

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8. Company Authorisation and Declaration

By completing and submitting this application, you confirm that: (i) you are authorised to sign this application, provide the declaration and authorisations herein on behalf of the business named in section 1; (ii) you have informed the persons named in this application of the purposes of the processing of this application carried out by American Express Services Europe Limited ("American Express"), including the checks of personal and business records held at credit reference agencies and records held by fraud prevention agencies; (iii) you are authorised to provide the personal data included in this application to American Express; (iv) you have informed the persons named in the application that further identification and verification checks may be carried out against them as required; and (v) you acknowledge that personal data provided in this application may be processed in accordance with applicable data protection law for the purposes of administering your participation in the Programme(s).

For further information on how American Express collects and processes data, please refer to the British Airways American Express Corporate Programme Terms and Conditions/Global Master Agreement, as applicable provided with this application.

You warrant that the information herein is true and correct and that you will notify American Express of any changes. You authorise American Express to contact your bankers or any other source to obtain any information it requires to establish the Account. You certify the business is not a microenterprise as defined by Commission Recommendation 2003/361/EC i.e. the business has a group turnover and/or annual balance sheet total greater than EUR 2 million and employ 10 persons or more. You assume responsibility for all Charges incurred by your directors, employees or contractors and for implementing and exercising reasonable measures and controls to ensure that the Account is used only in accordance with the British Airways American Express Corporate Programme Terms and Conditions/Global Master Agreement, as applicable provided with this application. You understand that American Express may decline this application without giving a reason and without entering into any correspondence.

Where a PA is employed by an Affiliate legal entity or a third party servicing centre, you authorise American Express and/or American Express' Affiliates to send or make available to that PA/legal entity any data which the PA is entitled to receive as granted by the business per this application. You shall ensure: (a) you have the authority from your employees, contractors or agents that use the Programme ("Individuals") and any Individuals of your Affiliates to request sending the data or making it available on a global basis; and (b) the consent of such Individuals is obtained where required by applicable law. You acknowledge that American Express does not take responsibility for any information sent or made available to a PA/legal entity on such authorisation by you.

If you elect to use a third party identified as BTA Facilitator in section 4 to act as your agent to facilitate your use of and reporting for the Business Travel Account, you agree to provide us with any additional authorisation related documentation for such BTA Facilitator. Upon receipt of the authorisation and approval by us of such BTA Facilitator, we agree to work with the BTA Facilitator to implement the Business Travel Account on your behalf and grant the BTA Facilitator access to the Online Services and/or any other client facing tools that facilitate the use and management of the Business Travel Accounts, solely in accordance with the terms of the British Airways American Express Corporate Programme Terms and Conditions/Global Master Agreement, as applicable.

You acknowledge and agree that the BTA Facilitator is your agent acting on your behalf at your request and that you are liable for all transactions initiated or Charges made by the BTA Facilitator using the Business Travel Account. Your authorisation of BTA Facilitator can be revoked upon no less than thirty (30) days' prior written notice to American Express. You understand that on the revocation effective date, American Express will cancel the accounts managed by the BTA Facilitator. You shall be liable for any action taken by the BTA Facilitator prior to the effective date of such revocation. Indemnification, confidentiality and data security obligations survive the revocation effective date.

You acknowledge and agree that, to the extent permitted by applicable law, we are not responsible for any negligence, fraud or willful misconduct of the BTA Facilitator and/or its/their employees, subcontractors or agents in connection with the accessing or using the Business Travel Account. You shall indemnify, defend and hold American Express, its affiliates and its and their respective officers, directors, employees, agents and contractors harmless from and against all claims, suits, demands, actions, proceedings and litigations relating to (i) American Express permitting BTA Facilitator to use the Business Travel Accounts or access the Online Services, (ii) the acts or omissions of the BTA Facilitator and BTA Facilitator's respective affiliates, employees, contractors, officers, agents and/or subcontractors with respect to their obligations set forth in this application and in the British Airways American Express Corporate Programme Terms and Conditions/Global Master Agreement, as applicable.

By signing this application, you request that we enrol the business in a new British Airways American Express Business Travel Account. You acknowledge that the British Airways American Express Corporate Programme Terms and Conditions/Global Master Agreement, as applicable, that the business previously accepted, as amended from time to time, the current version of which American Express has provided with this application for reference, apply to the new Programme.

Signature

X

D D M M Y Y

Full First and Middle Name(s):

Last Name:

Residential Address:

Postcode:

Country:

Date of Birth (DDMMYY):

Submitting your Application Form

IMPORTANT: Please check all relevant fields are complete. Missing data may delay the processing of your application.

Please print this document, then sign and date section 8.

Please return this application to your American Express representative.

If sending documents by email, please remember that the internet can be insecure.

BTA-BA-UK-ProductApp-Apr2025

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