SBS Additional Cardholder Application Form



Please select the Credit Card you're apply	ring for: SBS Visa Cre	dit Card SBS Pink Ribbon Visa		
	Your details	3		
First name	Middle name	Last name		
Customer number	Account numb	per		
Mobile number	Email			
Residential Address				
Suburb/Town	City			
Country	Postcode			
By nominating a person as an Additional Ca	ardholder on your account, y	ou confirm that:		
 The nominated person is 18 years old or older; The nominated person is a family member of yours; and You have the permission of the nominated person to provide us with their personal information. 				
You acknowledge and understand that if you Card Account, the Additional Cardholder:	our nominated Additional Car	dholder is approved to have an additional card on your		
Will be able to use funds on your Credit Card account up to the current credit limit and you will be solely responsible for making repayments, and				
Will have access to your account until either you revoke their access and card, or SBS Money Limited, cancels or suspends your Card Account.				
You also accept and agree that:				
Your SBS Card Account and the use of the Card Account continues to be governed by the SBS Visa Credit Card or SBS Pink Ribbon Visa (whichever is applicable) Conditions of Use.				
Main Cardholder's signature		Date D D M M Y Y Y		
A	dditional Cardholde	er's details		
First name	Middle name	Last name		
Date of Birth	Y Relationship	to customer		
Mobile number	Home/Work	Number		
Email	Member Nur	nber		
		1		
Confirmation of identity				
Please provide information for <i>ONE</i> of the identification documents listed below, so we can confirm who you are. Please note, if you provide us with details of your overseas passport, you'll need to send us certified copies of these documents.				
a. Passport number:	Country	of issue:		
New Zealand residency number if you h	·			
If you hold an Australian, Cook Island, Tokelau or Niue Passport you don't need to fill out the New Zealand residency number.				
Expiry date:				
b. New Zealand Driver licence number:	Version number:	Expiry date:		

Residential Address			
Subur	urb/Town City		
Count	ntry Postcode		
Perso	onal and Privacy Information		
	is the Privacy Statement of SBS Money Limited (SBS Money, we, our or us). This Statement is a summary acy Policy which can be found here https://www.sbsbank.co.nz/credit-cards	of our full	
Why we collect personal information You authorise us to collect personal information about you to enable us to communicate with you and provide or offer services to you, including assessing your application to be an additional cardholder (and verifying your identity or other details), managing your account(s) and maintaining our credit records (as applicable).			
What personal information we collect and from where The kind of information we may collect from you depends on the nature of your application. Generally, it may include your personal contact/identity details, your credit history, credit requirements and personal finances (as applicable to your application). We may also collect your personal information from, and share your personal information with, other organisations who assist us to interact/communicate with you. These include credit reporting and identification/verification agencies, other related entities (like SBS Bank), Charity Partners, relevant retailers and other third parties. We may also use common internet technologies to collect data from our websites and emails.			
You do	r rights do not have to provide your personal information to us but if you don't, we will not be able to assess your app dditional cardholder. You are entitled at any time to request a copy of your personal information and correct t mation if you think there are any errors. You can contact us on 0800 727 2273 during business hours.		
	roceeding with this application, you acknowledge that:		
•	You will be able to use funds on the Main Cardholder's account up to the current credit limit and you will not be liable for any charges you incur.		
•	You will have access to Card Account information, such as the current balance, available balance, and de transactions on the Card Account.	tails of your	
•	You will be able to activate your card, set your PIN, report your card lost or stolen and request a new card		
Please confirm that you:			
	agree to hold an additional card on the Main Cardholder's Card Account;		
	have read and agree to the Personal and Privacy Information above; and		
	the information provided to us is true, correct and complete.		
Additi	litional Cardholder's signature	Y	
Your SE	SBS Visa Credit Card or SBS Pink Ribbon Visa (whichever is applicable) is provided by SBS Money Limited (a 100% subsidiary of	SBS Bank).	
Office Use Only			
Please	se read and attest to the following:		
	I have provided both the Main Cardholder and the Additional Cardholder with the disclosures provided on this form		
	I have authenticated the Main Cardholder		
I have sighted the original copy of the Additional Cardholder's identification and it is a likeness of the person presenting it			
SBS E	Branch Representative Full Name		
SBS Branch Representative signature			
Date D D M M Y Y Y			

SBS Bank Branch Location