

CARDHOLDER INFORMATION				
Name of Cardholder:		Last Name	First Name	Middle Name
Card Number (16 digits):		Card Expiry Date (Valid Thru):		
Date of Birth: (MM/DD/YYYY)		Place of Birth:		
Status: <div><input type="radio"/> Single</div> <div><input type="radio"/> Married</div> <div><input type="radio"/> Separated</div> <div><input type="radio"/> Other</div>		Gender: <div><input type="radio"/> Male</div> <div><input type="radio"/> Female</div>		
Home Phone Number:		Mobile Phone Number:		
Nationality:		Office Phone Number:		
E-mail Address:		Tax Identification Number:		
Department/Unit:		GSIS/SSS No.:		
Employer/Business Name:		Date Hired:		
Source of Funds: <div><input type="radio"/> Salary</div> <div><input type="radio"/> Savings</div> <div><input type="radio"/> Investment</div> <div><input type="radio"/> Business</div> <div><input type="radio"/> Pension</div> <div><input type="radio"/> Family Supported</div> <div><input type="radio"/> OFW Beneficiary (Which Country?)</div> <div><input type="radio"/> Others (Please Specify)</div>		Nature of Work/Business:		
Present Address:				
No.	Street	District/Town	City	Zip Code
Permanent Address:				
No.	Street	District/Town	City	Zip Code
Office Address:				
No.	Street	District/Town	City	Zip Code
<div>IMPORTANT: Please provide supporting documents for validation of our Customer Service Representative. 1. Update in Cardholder's last name and/or status – provide valid government-issued IDs or Marriage Certificate/ Annulment Documents. 2. Update or Correction in Address – proof of billing, valid government-issued ID indicating your address, or Certificate of Employment (if business address). 3. Update/Change in Employer – provide Company ID.</div>				
CARDHOLDER UNDERTAKING AND DECLARATION				
<div>By affixing my signature and by submitting this form, I hereby warrant to the best of my knowledge and belief that the information furnished above is true and correct.</div> <div>In case of any material change of the information, I agree to promptly notify AUB of such change.</div> <div>I hereby acknowledge and authorize the transfer, disclosure and communication of any information relating to my credit card/s with AUB and/or its parent companies, subsidiaries or affiliates, as well as its third party providers, agents, and representatives, for purposes of data processing and storage, customer satisfaction surveys, products and service offers and updates through post/email/fax/SMS/telephone, and for any other purpose AUB deems appropriate and relevant to me, and/or as may otherwise be required by applicable laws, rules, and regulations.</div> <div>I also hereby authorize the regular submission and disclosure of my credit information to the credit bureau and/or as may be necessary for AUB to comply with R.A. 9510 and its implementing rules and regulations. The foregoing constitutes my written continuing consent to any submission and disclosure of information relating to my credit card/s for the purposes stated above and/or as may otherwise be required under applicable laws, rules and regulations. Accordingly, I hereby hold AUB free and harmless from or otherwise be related to any liability that may arise from such transfer, disclosure, processing and/or storage of information relating to my credit card/s.</div> <div>I understand that falsifying any information in this document is sufficient ground for cancellation of my card without prior notice.</div> <div>I further agree that the information in this form shall be retained for a period of time as provided, required or allowed under applicable laws, rules and regulations.</div> <div><div>Signature over Printed Name</div><div>Date</div></div>				