

Supplementary Card Application Form

PRIMARY ACCOUNTHOLDER DETAILS																
Last Name:								Account Number:								
First Name:							ID	ID Туре:								
Middle Name:							ID	ID Number:								
Product Name:							ID	ID Expiry Date:								
Credit Card Number:	Х	Х	Х	Х	Х	Х	Х	Х	Х	X	Х	X				
Would you like to set up a spending limit per billing cycle to your supplementary card?																
If yes, % of credit limit?																

SUPPLEMENTARY CARDHOLDER DETAILS

Gender: 🗌 Male 🗌 Fema	ale	Date of Birth:					
Title:		Country of Birth:					
Last Name:		Occupation:					
First Name:		TRN:					
Middle Name:		Mobile Number:					
Mother's Maiden Name:		VM Member: 🗌 Yes 🗌 No					
Marital Status: 🗌 Single	Married Divorced	Other					
ID Type: Driver's License Passport National ID Other Govt. ID							
ID Number:		ID Issued Date:					
Country of Issue:		ID Expiry Date:					
RESIDENTIAL ADDRESS							
Apt Number:		Parish:					
Street Number:		Country:					
Street Name:		Time at current residence:					
MAILING ADDRESS							
Apt Number:	Street Number:	Street Name:					
Preferred Branch:		Card Issuance:					

Electronic Indemnity? 🗌 Yes 🗌 No

SUPPLEMENTARY CARDHOLDER DECLARATION

Upon signing and submitting this form, the applicant is agreeing to become a Supplementary Cardholder. The applicant agrees that:

- The information provided is valid, accurate and complete.
- The VM Building Society or the Building Society will send all information regarding the Supplementary Credit Card to the Primary Credit Cardholder.
- VM Building Society is authorized to further verify, at its discretion, all information submitted with respect to any Know your Customer (KYC) identification and contact information.
- The Building Society reserves the right not to accept or approve an application. In the event the application is not approved, the Building Society will notify
 the applicant of the decision.
- We reserve the right to re-evaluate an approved application and, if not deemed fit, withdraw, or terminate access to the facility.



Date

Do note that the terms and conditions of this application, form a part of the VM Building Society Credit Card Terms and Conditions.

In the event an application is approved, you agree to the Credit Card Terms and Conditions when you accept, sign, or use your Card or accept funds from your Account.

For more information on the VM Building Society Credit Card Terms and Conditions, you may visit our website at www.myvmgroup.com

PRIMARY ACCOUNTHOLDER DECLARATION

I hereby apply for a VM Building Society Supplementary credit card. Upon signing and submitting this form, I attests that:

- The information provided is valid, accurate and complete.
- The VM Building Society or the Building Society has the applicant's consent to share the information provided with other partners including but are not limited to card issuers, card associations and other divisions within the VM Group at the Building Society's discretion.
- VM Building Society is authorized to further verify, at its discretion, all information submitted with respect to any financial institution, employment history, credit history, and all other Know your Customer (KYC) identification and contact information.
- The primary accountholder is liable for all charges incurred on the Supplementary Credit Card.
- Where applicable, the Building Society may charge an account fee due to the creation of the credit card and bill the fee directly to the account. For more information, you may read the VM Building Society Credit Card Terms and Conditions by visiting our website at www.vmbs.com.
- The Building Society reserves the right not to accept or approve an application. In the event the application is not approved, the Building Society will notify
 the applicant of the decision.
- Additionally, the Building Society reserves the right to review and, if not deemed fit, at the Building Society's sole discretion withdraw or terminate the facility.

Primary Accountholder's Signature:

Date

Email: manager@myvmgroup.com | Telephone: 876 754 8627 | Fax: 876 967 2409 | Address: 73-75 Half Way Tree Road, Kingston 10

