

# SUPPLEMENTARY CARD APPLICATION

You may apply for up to 4 Supplementary Cardholders and assign spending limits to each. The Principal cardholder and supplementary card applicants are required to submit a photocopy of a valid government-issued ID and complete the fields marked(\*).

The spending limit given to the Supplementary Cardholder is part of the Principal's credit limit. If the spending limit indicated is greater than the approved credit limit, the spending limit to be given to the Supplementary Cardholder will be the same as the approved credit limit.

Note: Supplementary Cardholder must be 14 to 80 years old.

## PRINCIPAL CARDHOLDER \*

First Name	Middle Name	Last Name

Card No.\*

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## SUPPLEMENTARY CARDHOLDER 1 \*

First Name	Middle Name	Last Name

Name to appear on the card\*

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Present Home Address\*


Permanent Home Address (if different from Present Home Address)\*


Relation to Principal Cardholder	Nationality/Citizenship* <input type="checkbox"/> Filipino <input type="checkbox"/> Others _____ <small>(For foreigners, attach ACR or ICR)</small>
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Date of Birth* <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">□ □</td> <td style="width:10%; text-align: center;">□ □</td> <td style="width:10%; text-align: center;">□ □</td> <td style="width:10%; text-align: center;">□ □</td> <td style="width:10%; text-align: center;">□ □</td> <td style="width:10%; text-align: center;">□ □</td> </tr> <tr> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">D</td> <td style="text-align: center;">D</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table>	□ □	□ □	□ □	□ □	□ □	□ □	M	M	D	D	Y	Y	Place of Birth*	Mother's Maiden Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
□ □	□ □	□ □	□ □	□ □	□ □										
M	M	D	D	Y	Y										

Home Phone No.*	Mobile Phone No.*	Assigned Spending Limit <input type="checkbox"/> 100% of Principal's Credit Limit <input type="checkbox"/> Other:Php _____
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Source Of Funds*		
<input type="checkbox"/> Employment ___ Private ___ Gov't	<input type="checkbox"/> Self-employment/Business	<input type="checkbox"/> Others, please specify _____
<input type="checkbox"/> Investments (Property, Deposits, etc.)	<input type="checkbox"/> Retired (Pension, etc.)	_____
Nature of Work/Business _____		Company Name _____

T.I.N. / SSS / GSIS\*

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## SUPPLEMENTARY CARDHOLDER 2 \*

First Name	Middle Name	Last Name	*

Name to appear on the card\*

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Present Home Address\*


Permanent Home Address (if different from Present Home Address)\*


**SUPPLEMENTARY CARDHOLDER 2 (CON'T)**

Relation to Principal Cardholder		Nationality/Citizenship* <input type="checkbox"/> Filipino <input type="checkbox"/> Others _____ <small>(For foreigners, attach ACR or ICR)</small>													
Date of Birth* <table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> <tr> <td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td> </tr> </table>							M	M	D	D	Y	Y	Place of Birth*	Mother's Maiden Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
M	M	D	D	Y	Y										
*Home Phone No.*	Mobile Phone No.*	Assigned Spending Limit <input type="checkbox"/> 100% of Principal's Credit Limit <input type="checkbox"/> Other: Php _____													
Source Of Funds* <input type="checkbox"/> Employment ___ Private ___ Gov't <input type="checkbox"/> Self-employment/Business <input type="checkbox"/> Others, please specify <input type="checkbox"/> Investments (Property, Deposits, etc.) <input type="checkbox"/> Retired (Pension, etc.) _____															
Nature of Work/Business _____		Company Name _____													

T.I.N. / SSS / GSIS\*

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**UNDERTAKING**

I/We hold myself/ourselves liable for all obligations and liabilities incurred with the use of the Metrobank credit card/s issued to me/us. I/We warrant, that I/we shall be jointly and severally liable for the same obligations and that I/we hereby commit myself/ourselves to the following declarations: (1) I/We certify that the foregoing facts are true and correct; (2) I affirm and confirm my authority and express consent given to my Principal in sharing of my personal data to METROPOLITAN BANK & TRUST COMPANY [Metrobank] for the processing and issuance of this credit card; (3) I/We authorize and consent Metrobank, its affiliates, subsidiaries, third-party service providers, to assign, process, transfer, share, disclose, and communicate any and all of my/our personal data as defined under the R.A. 10173 (The "Data Privacy Act of 2012") and its implementing Rules and Regulations, information relating to my/our credit card accounts, or any of my/our basic credit data, and any and all information concerning myself, my/our properties or investments with Metrobank, to any of the offices, branches, subsidiaries, affiliates, agents and representatives of Metrobank and third parties selected by any of them, including other financial institutions, for purposes of credit verification, collection and credit review and scoring, statistical and risk analysis and to government entities tasked to provide consumer credit reporting or reference schemes, anti-money laundering monitoring purposes including but not limited to The National Privacy Commission, CIC or Credit Information Corporation pursuant to R.A. 9510 (the "Credit Information Act of 2008"), Republic Act (R.A.) 9160, as amended by R.A. 9194 (the Anti-Money Laundering Act), R.A. 8484 (the Access Device Act of 1998), and their respective Implementing Rules and Regulations; (4) I/We authorize and consent Metrobank to acquire my/our personal data and any information from Metrobank and Philippine Savings Bank (PSBank) and any of its subsidiaries and affiliates to facilitate the approval of my credit card application as well as credit card transactions, e.g., cash advance, increase in credit limit, etc., initiated upon my/our own initiative and in the event of default arising from non-payment of credit card obligations with Metrobank; (5) I/We understand that should my/our application be denied, Metrobank has no obligation on its part to furnish the reason for such rejection except when the denial is based on credit data from CIC used in the evaluation of my/our application; (6) I/We authorize Metrobank, its authorized representative/s and/or agent/s to verify and investigate these facts from whatever source it may deem appropriate; (7) I/We agree to the TERMS AND CONDITIONS governing the issuance of a Metrobank credit card.

Conformity to Terms & Conditions of Metrobank: (1) by signing on the application form or delivery acknowledgment receipt; (2) by signing at the signature portion of the credit cards shall constitute the Card Member's express consent and shall constitute a waiver of claims and exempt Metrobank, any of the offices, branches, subsidiaries, affiliates, agents and representatives, and/or Metrobank Group from liability under any and all bank deposit secrecy laws, including but not limited to, R.A. 1405 or The Law on Secrecy of Bank Deposits, R.A. 6426 or The Foreign Currency Deposit Act and R.A. 8791 or The General Banking Law, as well as R.A. 10173 or the Data Privacy Act of 2012 and other confidentiality laws enforced or which may hereinafter enforced.

SIGNATURE OF PRINCIPAL CARDHOLDER *	DATE
SIGNATURE OF SUPPLEMENTARY CARDHOLDER 1 *	DATE
*SIGNATURE OF SUPPLEMENTARY CARDHOLDER 2 *	DATE