

2 Free Supplementary HSBC Amanah Al Wafaa Credit Card(s)

Mail this to: Card Products Division, P.O. Box 500368, Dubai, UAE.

SUPPLEMENTARY CARD(S) REQUIRED

1. Mr. Mrs. Ms. Other _____

Full Name:

Date of Birth: DD/MM/YYYY / /

Nationality: _____

2. Mr. Mrs. Ms. Other _____

Full Name:

Date of Birth: DD/MM/YYYY / /

Nationality: _____

Primary Cardholder's Name:

Primary Cardholder's Card Number:

DECLARATION

I, the Supplementary HSBC Amanah Card ('Supplementary HSBC Amanah Card') applicant agree to be jointly and severally liable for all transactions processed by the use of the Supplementary HSBC Amanah Card applied for and issued by HSBC to myself and acknowledge that the use of my Supplementary HSBC Amanah Card will be subject to the HSBC Amanah Terms and Conditions (which may be amended from time to time at HSBC's sole discretion) accompanying the Supplementary HSBC Amanah Card. I understand that by retaining or using the Supplementary HSBC Amanah Card I accept the HSBC Amanah Cards Terms and Conditions.

1st Supplementary Card Applicant's Signature

2nd Supplementary Card Applicant's Signature

(I am over 16 years of age)

(I am over 16 years of age)

Date: _____

