



Personal Credit Card Application Form

Please remember to include the following with your application

- Government IDs: 2 of passport, national ID, driver's license, voter's ID, armed forces ID* (where applicable)
- Proof of physical and mailing address (if not on ID) such as utility bill
- Income pay slip issued last month*
- Self employed - financials (2 years) and business registration documents*
- Original employment letter, must include salary, length of employment and company contact details
- Bank statement (most recent 3 months)
- Mortgage statement (if applicable)
- Confirmation of disclosed assets/savings
- Confirmation of existing liabilities, i.e. loans, credit cards, hire purchases, etc. (last 3 months statements)

*UWI Staff need to only submit these items

I am applying for: Classic Rewards Platinum British Airways Platinum* Mastercard Black JetBlue Standard JetBlue Select UWI

Are you a TrueBlue or British Airways Executive Club member?

If you are, kindly provide us with your TrueBlue or British Airways Executive Club account number _____

*To be eligible to earn TrueBlue/Avios you must be enrolled in the British Airways Executive Club/JetBlue Rewards program associated with your country of residence. If you are not already a member, you will be automatically enrolled upon approval of your Credit Card and you will be notified of your Rewards number. Kindly note the airline reserves the right to decline your application for membership.

Mr. Mrs. Ms. Miss First name _____ Middle initials _____ Last name _____

Name as to appear on the card (maximum 19 characters) _____ Date of birth (mm/dd/yyyy) _____ No. of dependents _____

Marital status Married Single Divorced Other _____ Country of birth _____ Passport/nat'l ID _____ Other ID _____

Jamaica only - TRN (required) _____ TrueBlue# _____ Country of citizenship _____ Mother's maiden name _____

Street address _____ City _____ Country _____

Mailing address _____

Residential status Own home Rent/board Living with parents/relatives Other Time at current address _____ Years _____ Months _____

If less than 2 years at current address, time at previous address _____ Years _____ Months _____ Address _____

(_____) (_____) Home phone _____ Mobile phone _____ Preferred mode & time of contact _____

Email address (required to access the rewards features of the Rewards credit card) _____

Employment Full time Part time Contract Self employed Occupation _____

Employer/business name _____ Business phone (_____) _____

Employer address _____

Employment sector Financial Hospitality Government Manufacturing Construction Retail Other _____

Time with employer _____ Years _____ Months _____

If less than 2 years at current employer, previous employer name _____ Phone (_____) _____

Time with employer _____ Years _____ Months _____ Address _____

Highest level of education completed Elementary High School College or University Post graduate Other _____

Financial Information

Monthly employment income \$ _____ Other income \$ _____ Source _____

Rent or mortgage payment monthly \$ _____ Lender name _____

Do you have any other loans with CIBC Caribbean? Yes No Amount \$ _____ Monthly payment \$ _____

Other credit cards Yes No Lender name _____ Amount \$ _____ Monthly payment \$ _____

Lender name _____ Amount \$ _____ Monthly payment \$ _____

Total monthly expenses (excluding loans, housing, credit cards) _____ Currency of financials stated _____

This account is for the benefit of the account holder(s) and will not be used for any Third Parties Yes No

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References (Individuals not living in your household)

First name [] Middle initials [] Last name []

Mailing address

Occupation

()

Telephone #

Relationship to Primary Cardholder:

Additional Cardholder Information

First name [] Middle initials [] Last name []

Name as to appear on the card (maximum 19 characters) []

()

Telephone #

Relationship to Primary Cardholder:

Passport/nat'l ID

Jamaica only - TRN (required)

Date of birth (mm/dd/yyyy)

If not the same as main applicant - Address:

Do you wish to set up Auto-Payments for your card?

Yes

I wish to have monthly payments deducted from my/our bank account and credited to this credit card account as below.

Pay automatically each month (select one)

Minimum payment

Full statement balance

A fixed amount of \$

Pay from this bank account

Account number []

Account type Chequing Savings

Branch []

Your associated payment account should bear sufficient funds on the day before the payment due date of your credit card. The Bank is under no obligation to process a payment if there are insufficient funds in the account on the payment due date. The Bank reserves the right to terminate these instructions if there are insufficient funds in the account to process the payment on the payment due date. A service charge will be applied as a result of insufficient funds or in the event that the payment amount selected is insufficient to cover your minimum payment. Cancellation of or amendment of these instructions must be given in writing to the Bank at least seven business days prior to the next payment due date. I hereby acknowledge receipt and understanding of a copy of the above agreement.

Would you like to protect your CIBC Caribbean Credit Card balance?

Yes

I understand that participation in the CIBC Caribbean creditor group insurance plan ("the plan") is optional and only available to CIBC Caribbean credit card holders. I understand and acknowledge that to be eligible for participation in the plan: (a) I must be at least 18 years of age and under age 70, (b) I must be the primary cardholder on an eligible CIBC Caribbean credit card, (c) I must have agreed to the terms and conditions of the CIBC Caribbean Credit Card Cardholder Agreement, and (d) my credit card account must be in good standing.

I agree that my participation in the plan will be bound by the terms and conditions stated in the Certificate of Insurance I receive. Furthermore, I authorize CIBC Caribbean to provide the plan insurer with my CIBC Caribbean credit card account number, monthly statement balance and any other information.

I authorize the plan insurer to charge monthly premiums to my CIBC Caribbean credit card account.

I further understand and agree that any secondary cardholder will be bound by these terms and conditions.

Authorisation

It is understood that by signing, activating and/or using the CIBC Caribbean Credit Card, the Applicant and all Additional Cardholders have received and read the terms and conditions set out in the Credit Card Cardholder Agreement (Agreement) applicable to the Card. It also means that the Applicant and Additional Cardholder(s) understand and agree to be bound by all the terms and conditions contained therein. It is understood that if the Applicant and Additional Cardholder(s) do not receive a copy of the Agreement, or have questions regarding the Agreement, contact will be made with CIBC Caribbean Card Services. The Applicant understands and accepts that the terms and conditions of the Agreement may change from time to time and consents to CIBC Caribbean Bank Limited (CIBC Caribbean) informing of any changes to the Agreement via its branches, the post or on its website at www.cibccaribbean.com. The Applicant promises to repay all credit extended in relation to this application, including any applicable annual fees.

Whether or not credit is granted, the Applicant and Additional Cardholder(s) consent to CIBC Caribbean exchanging and/or disclosing information, to other parties including with CIBC Caribbean subsidiaries and/or CIBC Caribbean affiliates, contractors, service providers, card processors, whether or not such other parties are located in the country where the Card is issued, concerning the Applicant's and Additional Cardholder's credit history, income and/or employment. Further, the Applicant and all Additional Cardholders agree that CIBC Caribbean may share information about the Credit Card Account through licensed credit reference agencies; regulators or competent authorities; or other financial institutions. Shared information from these agencies or institutions is to make lending decisions or prevent fraud or for such other proper purpose. The Applicant and all Additional Cardholders certify under penalties of perjury that the information provided in this Application is accurate and correct. The Applicant and/or Additional Cardholder(s) agree that CIBC Caribbean or any subsidiary or affiliate of CIBC Caribbean may use that information in this Application or information on the Credit Card Account to establish and maintain relationship with the Applicant and/or Additional Cardholder(s); to service the Card Account and/or to offer the Applicant and/or Additional Cardholder(s) any current products or services or additional services as permitted by law, regulatory and/or statutory body and/or government organization.

By providing an e-mail address and telephone/mobile number the Applicant and/or Additional Cardholder(s) authorise CIBC Caribbean and/or CIBC Caribbean subsidiaries or CIBC Caribbean affiliates to contact the Applicant and/or Additional Cardholder(s) by these means.

By signing below, the Applicant and all authorised users agree to the conditions contained herein.

It is understood and agreed that CIBC Caribbean will not mail or otherwise deliver printed statements, unless CIBC Caribbean in its sole discretion deems appropriate to do so, in which case, a fee may apply. I agree to access my credit card statements online via Internet Banking, which is any electronic channel CIBC Caribbean makes its banking services available to me via the internet, including via its Mobile app.

I also agree to make credit card payments via Internet Banking and any Smart ATM made available by CIBC Caribbean, from time to time and to open at least one (1) deposit account via www.cibccaribbean.com to facilitate my payments through Internet Banking.

Signature of Applicant: Additional Cardholder Signature:

.....
Date (mm/dd/yyyy)

.....
Date (mm/dd/yyyy)



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Further Authorisation For British Airways Applicants

The Applicant agrees to CIBC Caribbean's transfer of the Applicant's personal data to British Airways (including its business partners or selected companies) for the purposes of marketing promotion and business development of services/products which may be of interest to the Applicant. The Applicant shall be entitled to request for details of personal data so transferred and to write to British Airways to amend or discontinue further use of the Applicant's personal data by British Airways.

British Airways will use the Applicant's e-mail address to administer the Applicant's account and send marketing messages. The Applicant can update preferences at www.ba.com. The Bank will use this email address for further promotional and information updates.

Signature of Applicant: Additional Cardholder Signature:

...../...../.....
Date (mm/dd/yyyy)

...../...../.....
Date (mm/dd/yyyy)

Further Authorization For JetBlue Applicants

The Applicant agrees to CIBC Caribbean's transfer of the Applicant's personal data to JetBlue (including its business partners or selected companies) for the purposes of marketing promotion and business development of services/products which may be of interest to the Applicant. The Applicant shall be entitled to request for details of personal data so transferred and to write to JetBlue to amend or discontinue further use of the Applicant's personal data by JetBlue.

JetBlue will use the Applicant's e-mail address to administer the Applicant's account and send marketing messages. The Applicant can update preferences at www.jetblue.com. The Bank will use this email address for further promotional and information updates.

Signature of Applicant: Additional Cardholder Signature:

...../...../.....
Date (mm/dd/yyyy)

...../...../.....
Date (mm/dd/yyyy)

Bank Use Only

CIF#: Login ID: Referred by:

Officer Name: Referrer Branch/Unit:

Officer Code: Branch: