ANZ CONSUMER CREDIT CARDS ADDITIONAL CARDHOLDER(S) APPLICATION

CREDIT CARD ACCOUNT DETAILS



Account Number Account Name ADDITIONAL CARDHOLDER DETAILS Note: Additional Cardholders must be over 16 years of age. An Annual Fee and/or Rewards Program Services Fee may be payable for each additional card on your account. Please review your Letter of Offer/Welcome letter/Product Disclosure Statement or call us for details. If Additional Cardholders do not have an existing ANZ account, they must complete ANZ's Customer Identification Process (required by the Anti-Money Laundering and Counter-Terrorism Financing Act) at an ANZ branch before activating or using their card. Additional Cardholder One Title First Name Full Middle Name(s) (If no middle name exists, write N/A) Surname Date of Birth (DD/MM/YYYY) Residential Address (PO Box not accepted) Same as Primary Card Holder's Address Unit No. House No. Street Name Street Type Suburb State Postcode Your occupation

Date (DD/MM/YYYY)

Additional Cardholder Two

Additional Cardholder's Signature

Title First Name	Full Middle Name(s) (I	f no middle name exists, write N/A)	Surname
Date of Birth (DD/MM/YYYY)			
Residential Address (PO Box not accepted) 🔲 San	ne as Primary Card Holo	der's Address	
Unit No. House No. Street Name			
Suburb	State	Postcode	
Your occupation			
Additional Cardholder's Signature		Date (DD/MM/YYYY)	

Street Type

ANZ CONSUMER CREDIT CARDS

CANCELLING AN ADDITIONAL CARD

You or the Additional Cardholder can request to cancel the additional card via ANZ Internet Banking, ANZ App, calling us or visiting any ANZ branch. Once the additional credit card is cancelled, then the Additional Credit Card must not be used and should be securely destroyed (including any chip). You are still liable for any amounts that are debited to the Credit Card Account as a result of use of the additional Credit Card (including transactions that have not yet been processed and any recurring transactions that have not been cancelled).

DECLARATION AND SIGNATURE

I acknowledge that as the Primary Cardholder, I am responsible for all transactions made on this account by any Additional Cardholder(s), including any potential breaches of relevant provisions of the Credit Card Contract. I also acknowledge that if my request for an Additional Cardholder(s) is approved, the Additional Cardholder(s) will have their own Personal Identification Number (PIN), access the card account electronically, obtain information about the status of my account and transactions made on my account as well as operate the Credit Card Account and any accounts linked to a Credit Card in the same way that I can (restrictions apply). I understand that if I choose to change my card product before this request is actioned then ANZ may apply this request to the new product type.

I have read and understood this application and declaration. I acknowledge that all information provided in this application form is true and correct.

Author	rised Signatory Given Name(s)	Authorised Signatory Surname
Author	rised Signatory Signature	Date (DD/MM/YYYY)
Altern	Email the form to CardsMaintenance@anz.com atively, you can apply for an additional cardholder using one of the	e following options:
= *	Return completed form (no stamp required) to: REPLY PAID 65798 ANZ Consumer Cards Locked Bag 10, Collins Street West Melbourne VIC 8007	
\	Call us on 13 22 73 (international callers: +61 3 8693 5077). Hours	s of operation available on anz.com
1	Visit your local branch	