NCBA

ADDITIONAL CARDHOLDER APPLICATION FORM

To be completed by the Cardholder

Date: (dd/mm/yyyy)

☐ Debit Card ☐ Credit Card

DETAILS OF PRINCIPAL CARDHOLDER

Name: First name Middle name Surname

Account number:

Address:

Postal address: Town:

DETAILS OF ADDITIONAL CARDHOLDER

Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Others (please specify)

Name: First name Middle name Surname

Date of birth: ID/ Passport number (attach photocopy):

Relationship to Cardholder: Additional cardholder mobile:

Please issue a card to me. I have read and accept and agree to be bound by the Conditions of Use as amended from time to time.

Signature of Additional Cardholder:

At NCBA, we value your privacy and are committed to protecting your personal information.

This form is used to collect personal information from you which is necessary for us to provide you with the services you require and to comply with applicable legal obligations. We may share your information with other NCBA Group members.

While using your information for authorized purposes, we may need to engage the services of third parties that may process your information outside of Kenya. When we do this, we'll ensure that the transfer is done lawfully and only to third parties who are obligated to handle the information with an appropriate level of protection to ensure the security of your information.

From time to time we may contact you with details of other bank products, services or offers we provide or events and competitions we run and you may opt-out of this at any point by sending an email to contact@ncbagroup.com.

For further details on how we use your information, and your rights in relation to our use of this information, please refer to our Privacy Notice at https://ke.ncbagroup.com/privacy-policy/ or you may request a hardcopy at any of our branches.

I/We the undersigned, confirm that I/We have read and understood the terms outlined in the Privacy Notice available at https://ke.ncbagroup.com/privacy-policy/ . I/We hereby authorize NCBA and its affiliates to process my personal information for the purpose stated above and as stipulated in the Privacy Notice.

Signature of Additional Cardholder:

FEE

Annual subscription for Additional User card as per NCBA Bank tarrifs

Subject to your approval and to the conditions of use (as amended from time to time) I authorize and request you to issue a card to the person named above as an additional user of my card Account. I warrant that the information given is true and complete.

Name of Principal Cardholder: Signature of Principal Cardholder:

Date: (dd/mm/yyyy)

FOR OFFICAL USE ONLY

Created by: Sanctioned by:

Card Serial number: