

PO LEUNG KUK VISA CARD APPLICATION FORM

保良愛心VISA卡申請表

All applicants must be Hong Kong resident over 18 years of age. For speedy processing, please attach the following documents (Please tick):
申請人必須為年滿十八歲之香港居民。為方便盡快處理申請，請附上以下文件（請加✓）：

- Copy of your and any Supplementary Card applicant's Hong Kong Identity Card.
台端及附屬卡申請人之香港身份證正本副本。
- Copy of your Po Leung Kuk Staff Card (if any).
台端保良局職員證副本（如有）。
- Copy of your latest Income/Profit Tax Return & / or Salary Statement.
台端最近之薪俸稅單或糧單副本。
- Copy of your latest bank deposits references (which can show your name and account number) for the previous 3 months and documents evidencing ownership of properties (if any).
台端最近三個月之銀行儲存往來記錄（須印有台端姓名與賬戶號碼）副本，如持有自置物業，亦請提供有關證明文件副本參考。
- Copy of your current residential proof e.g. rate bill, electricity bill, bank statement.
台端現居住址證明，如差餉、電費單、銀行月結單副本。

Documents supplied (including this Application Form) are not returnable.
所有提供之文件（包括此申請表）恕不退還。

PERSONAL DATA 個人資料

Please fill in block letter 請以英文正楷填寫

Mr. 先生 Ms. 女士

Surname 姓 _____ Other name 名 _____

Name in Chinese 中文姓名 _____ Date of Birth 出生日期 _____

HKID/Passport No. 香港身份證／護照號碼 _____ Nationality 國籍 _____

Marital Status Single 未婚 Married 已婚 Widowed 鰥寡 Divorced 離異

Home Address in English 住所地址（英文） _____

_____ Years there 居住年數 _____

Owned 自置 Rented 租 Company Quarters 宿舍
 Relative's 親屬產業 Mortgaged 按揭 Live with Parents 與父母同住

Monthly Payment 月付\$ _____

Home Telephone No. 住所電話 _____ Mobile Phone/Paging No. 手電／傳呼號碼 _____

Previous Home Address 前居地址 _____

Years there Owned 自置 Rented 租 Education Tertiary 大學／專上 Secondary 中學
居住年數 _____ 學歷 _____

OCCUPATION 職業資料

Name of Company in English 現職公司英文名稱 _____

Address in English 地址（英文正楷） _____

Business Nature 業務性質 _____ Tel. No. 公司電話 _____

Present Position 職位 _____ Years of Service 任職年期 _____

Annual Income 全年收入 _____ If self-employed Sole-proprietor 獨資東主 Shareholder/Partner 股東／合資
如自資者 _____

Name of previous company 前任僱公司名稱 _____

Applicant's status 申請人身份 Po Leung Kuk Director 保良局總理 PD Po Leung Kuk Staff 保良局員工 PS Donor 助養人 PP Public 公眾人士 PP

BANK/CREDIT REFERENCE 銀行／信用資料

Bank/Branch 銀行／分行 _____ Account Type 賬戶類別 _____ Account No. 賬戶號碼 _____

Credit Facilities 銀行信貸 Overdraft 透支 Personal Loan 私人貸款 Limit 限額 \$ _____ Amount 金額 \$ _____

Other Type of Credit Card Held 現持其他信用卡類別 _____ Issuing Bank 發卡銀行 _____ Credit Limit 限額 _____

SPOUSE'S DATA 配偶資料

Name in English 英文姓名 _____ Name in Chinese 中文姓名 _____

Company Name and Address 現職公司名稱及地址 _____

Telephone No. 電話 _____

ATM FACILITIES 自動櫃員機服務

I wish my credit card to have ATM access to the following account(s) maintained with you. Where the account is a joint account, all the account holders agree to the aforesaid arrangement by signing below and shall be responsible for the ATM Facilities utilized by the cardholder. 本人欲憑信用卡使用自動櫃員機處理下述本人設於上海商業銀行之戶口，如屬聯名戶，則所有戶主均同意此項安排及對持卡人使用有關服務負責並在此簽署確認。

Savings A/C 儲蓄戶： _____ Signature* _____

0|2|5|3| _____ 簽名* _____

Current A/C 支票戶： _____ Signature* _____

0|2|5|3| _____ 簽名* _____

* The signature(s) must comply with Bank's record. For Joint-Account, ALL account-holders must sign here. If you choose this service, you can use the Jetco or Cirrus global ATM to draw cash in local currency or enquire balance. (HK\$25 will be charged for each non-Jetco ATM cash withdrawal.) 簽名須與銀行記錄相符。如屬聯名戶口，須由所有戶主聯簽。選用此服務者，持卡人可同時使用Jetco 或全球貼有Cirrus標記之自動櫃員機提取當地貨幣之現金及查詢戶口結餘。（在非Jetco ATM提取現金每筆手續費為HK\$25）

ATM instruction in 櫃員機指示文字 English 英文 1 Chinese 中文 0

SUPPLEMENTARY CARDHOLDER 附屬卡持卡人

Please issue a supplementary card to my near kin named below. (age 16 or above)
請發附屬卡予下列本人之直系親屬（年齡十六歲以上）

Full Name in English 英文姓名 Mr./Ms. 先生／女士 _____

Name in Chinese 中文姓名 _____ Date of Birth 出生日期 _____

H.K. Identity Card No. 香港身份證號碼 _____ Relationship with Applicant 與申請人關係 _____

Company Name and Address 任僱公司名稱及地址 _____

Office Telephone No. 公司電話 _____

Please return this application form to SHANGHAI COMMERCIAL BANK LTD (CREDIT CARD DEPT) at 15/F, 47 Catchick St., Kennedy Town, Hong Kong.

Apply for VISA Card卡 VISA Gold Card金卡 RNR: _____
申請卡別 (Gold Card minimum requirement HK\$150,000, 金卡年薪要求港幣十五萬元。)



REFEREE 諮詢人

Nearest relative not living with you 非同住之近親
Name 姓名 _____ Telephone No. 電話 _____ Relationship 關係 _____

I confirm that I have obtained the prior consent of the referee for using his/her name. I understand that the referee shall not be liable for any charge and fee on my account.
本人證實已徵得上述人士同意作為本人之諮詢人，諮詢人對本人賬戶之賬款無需負任何責任。

SIGNATURE 申請人簽署

I/we confirm that the above information is true and correct and authorize the Bank to verify from any source the Bank may choose. I/we authorize you to make a donation through rounding up my/our Credit Card account monthly statement balance to the nearest HK\$10 to Po Leung Kuk. I/we acknowledge and agree that all personal data supplied herein (the Data) are given by me/us on a voluntarily basis to facilitate the opening or continuation of account(s) or other banking services. The Data may be used and disclosed by the Bank for any purpose and to any persons as the Bank in Bank's absolute discretion consider necessary. I/we also acknowledge that I/we have been informed of the Bank's policy about the purpose, use, disclosure and transfer of Data to the classes of persons as set out in statements, circulars, notices or terms and conditions of the Bank's Credit Card Cardholder Agreement, copies of which are to be sent to me/us together with my/our card(s) and available to me/us upon request. I/we further acknowledge my/our right under the Personal Data (Privacy) Ordinance before filling in the Data and submission of my/our application form. The use of the Bank's credit card services constitute my/our acceptance of all terms and conditions of the Credit Card Cardholder Agreement.

I/we understand that the Personal Identification Number (PIN) for accessing ATM and other terminals, and the Credit Card Automated Phone Enquiry (CAPE) Service PIN for accessing the CAPE service will be sent to me/us upon issuance of card, use of which are subject to the terms in the Credit Card Cardholder Agreement.

本人／吾等證實上述資料全部正確無訛並授權貴行可向任何方面查證。本人／吾等並授權貴行按本人月結單結餘進至十元為單位，將差額捐贈予保良局。本人／吾等承認及同意自願在此提供個人資料作開戶及繼續使用貴行服務之用。貴行可使用上述資料及自行決定在需要時披露予任何人作任何用途。本人／吾等承認已從貴行之報表、通函、通知或信用卡持卡人合約條款中得悉貴行於個人資料收集上之目的、使用、披露、轉讓予各類別受讓人之政策，並可向貴行索閱有關文件。本人／吾等在填具此申請及提供個人資料前已明瞭本人／吾等在個人資料（私隱）條例下之權益。使用貴行之信用卡服務即表示本人／吾等已接納貴行信用卡持卡人合約上所有條款。本人／吾等明瞭貴行於發卡後將寄出使用自動櫃員機及有關終端機之私人密碼(PIN)，及使用信用卡電話自動查詢服務之私人密碼(CAPE PIN)，使用該等密碼乃受持卡人合約有關條款約束。

* Signature of Principal Card Applicant 申請人簽署

* Signature of Supplementary Card Applicant 附屬卡申請人簽署

* The signature (s) should be the same as that will appear on the Credit Card.
申請表上之簽字應與信用卡上簽字相符

Date 日期： _____

BILLING ADDRESS 郵寄賬單地址 Home 住所 Office 公司
(P.O.Box not acceptable 郵箱號碼恕不接納)
CARD COLLECTION INSTRUCTION 取卡指示
Please send the card(s) to your branch at _____ district for my collection
請將信用卡送往貴行 _____ 區之分行待本人到取

Referral Data 推介人資料
Name in English 英文姓名 _____
Card No.* 卡號* : _____
(* Please fill in the last 8 digits of Po Leung Kuk VISA Card, *請填寫保良愛心VISA卡最後8位號碼。)

FOR BANK USE ONLY 銀行專用
SD _____ JS _____ HS _____ OC _____ TO _____
BC _____ CIS _____ DC/AP _____
CT _____ CL _____ GD _____ 04 _____ A/C _____ 18 _____ PI _____
FC _____ 01/15 _____ GC _____ NCG19 MEMO: _____
PN: _____ SN: _____

請將此申請表寄回香港西環吉席街47號15樓上海商業銀行（信用卡部）收。 10/98