

## Additional Credit Card request

### Primary cardholder's details

Your title  First name

Middle name  Last name

Date of birth  Mother's maiden name

**Where you live**  
(Have you moved recently? Give us a call on 13 37 39 and we'll update your records.)  
Your number  Street name

Town or suburb  State  Postcode

Home telephone number  Mobile number

Your account number

#### I understand that:

I authorise the fulfilment of the attached request(s) to set up the nominated people specified in section 2.

There is no annual fee (\$0) charged for each Additional No Annual Fee Card

There is an annual fee of \$29 for each Additional Low Rate Card

There is an annual fee of \$39 for each Additional Flyer Card

There is an annual fee of \$89 for each Additional High Flyer Card

The Primary Cardholder is responsible for all debts incurred by the Additional Cardholder(s).

Additional Cards cannot be issued to individuals under 16 years of age.

The Card may be cancelled at any time by phoning Virgin Money. This may not be effective until the Additional Card has been surrendered to Virgin Money or Citibank (the issuer) or the Primary Cardholder has taken all reasonable steps to have the Additional Card returned to Virgin Money or Citibank (the issuer).

Your signature  Date

x  /  /

### Additional cardholders' information

1 Their title  First name

Middle name  Last name

Date of birth  Mother's maiden name

**Where they live**  
Number  Street name

Town or suburb  State  Postcode

Home telephone number  Mobile number

Additional cardholder's signature

x

2 Their title  First name

Middle name  Last name

Date of birth  Mother's maiden name

**Where they live**  
Number  Street name

Town or suburb  State  Postcode

Home telephone number  Mobile number

Additional cardholder's signature

x

3 Their title  First name

Middle name  Last name

Date of birth  Mother's maiden name

**Where they live**  
Number  Street name

Town or suburb  State  Postcode

Home telephone number  Mobile number

Additional cardholder's signature

x

4 Their title  First name

Middle name  Last name

Date of birth  Mother's maiden name

**Where they live**  
Number  Street name

Town or suburb  State  Postcode

Home telephone number  Mobile number

Additional cardholder's signature

x

It's easy to order an additional Virgin Credit Card.

All you have to do is: 1. Complete this form. 2. Fax to **1300 301 304** OR mail to **Virgin Money, Reply Paid 1625, Sydney NSW 2001**.