CONTACTLESS STICKER CARD APPLICATION Your preferred card type: Credit **Contactless Sticker Card Application** PERSONAL INFORMATION Title: Mr ☐ Mrs ☐ Miss ☐ Dr ☐ Prof ☐ Other Gender: Male Temale Name in full (as per NIC/DL/PP): (Please underline your first name) Contact No. (For SMS Alerts/ Mobile 1: WhatsApp) E-mail: NIC No.: FOR EXISTING CARDHOLDERS ONLY C number: The account number you wish to link to the Contactless Sticker debit card "I/We, the undersigned request Cargills Bank PLC to extend/update my/our account(s) maintained with the bank with this Contactless Payment Card Application and do hereby agree to comply and be bound by all prevailing Rules and Regulations relating to the said service(s), including Electronic Funds Transfer Card Rules, and be applica-Simply Stick & Tapit ble from time to time under the Terms and Conditions. Further, I/We be bound by any variation, amendment and change made to the same as may be prescribed by the Bank from time to time in future. I/We agree that this agreement shall be governed and construed in accordance with all applicable Laws & Regulations." Redefining payments with Cargills Bank Tapit Signature of Primary Cardholder Signature of the Supplementary Cardholder €Cargi**l**sBank Date: DIDIMIMIYIYIYI Date: DIDIMIMIYIYIYI







