



Apply now for your Cayman National VISA Business Card $\texttt{Page}\, 1$

FOR BANK USE ONLY						
Sanction Decline No. of Cards						
Company Card Acct No. X X X X X X	Company Limit					
Cardholder Acct. No. X X X X X X	Limit (Please provide the first 6 and last 4 digits of the card					
Cardholder Acct. No. X X X X X X	Limit number in the spaces provided)					
Approved By Signature	Date D / M / Y					
BUSINESS DETAILS	Please write in BLOCK CAPITALS and tick where necessary					
Name of Company						
Physical Street Address	Mailing Address					
Telephone Fax	Type of Business					
Total Company Credit Limit Requested* USD: Contact	t Name Position Held					
*This amount must equal the sum of the Individual Cardholder Limits requested on the Cardholder Application Fo	orms.					
Company Name for Card Embossing Maximum of 20 characters including spacing and punctuation						
BANK DETAILS						
Bank Name	Branch					
NOTE: Non Cayman National Customers are kindly asked to submit a copy of their latest Audited Financial States	ments					
CARDHOLDER APPLICATION FORM	If additional cards are needed please photocopy this section					
Note: We assess an annual membership fee per card. The fees are applied to the account when opened and the arm. Mrs. Ms. Miss First	Middle					
Date of Birth D / M / Y Business Telephone	Name Home Telephone Cellular Telephone					
Home Address Credit Limit Requested for Named Cardholder USD:						
PO Box District	Postal Code Position Held					
Single Married Divorced Other Mother's Maiden Name						
Email						
To Cayman National Bank Ltd: Please issue me with a Cayman National VISA Business Card, as a Cardholder on the Card Account of the organisation named. I accept and agree to be bound by the Cayman National VISA Business Card Cardholder Agreement and Disclosure Statement (as set out herein and as amended from time to time). I also understand that any Cayman National VISA Business Card issued in response to this						
application may not be used for the purpose of cheque guarantee or cheque encashment. Signature Date						
To be completed by the prospective cardholder						
C C Firet	Middle					
Name	Name					
Date of Birth D / M / Y Business Telephone Home Address	Home Telephone Cellular Telephone Credit Limit Requested for Named Cardholder USD:					
PO Box District	Postal Code Position Held					
Single Married Divorced Mother's Maiden Name Email						
Entitus To Cayman National Bank Ltd: Please issue me with a Cayman National VISA Business Card, as a Cardholder on the Card Account of the organisation named. I accept and agree to be bound by the Cayman National VISA Business Card Cardholder Agreement and Disclosure Statement (as set out herein and as amended from time to time), I also understand that any Cayman National VISA Business Card issued in response to this						
application may not be used for the purpose of cheque guarantee or cheque encashment.						
Signature	Date					





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BOARD RESOLUTION To be completed by the Company						
At a duly convened meeting of the Board of Directors of						
Company Name		Position Held		B. The Company and the Bank hereby		
Held on the	day of	Authorising Limit		 Accepts and agrees to be bound by the Cayman National VISA Business Credit Card Agreement and Disclosure Statement as set out in this application (which have been produced to the meeting of which a certified copy of this Resolution forms part) and as amended from time to time. 		
Two thousand and		Name				
IT WAS RESOLVED THAT A. Cayman National Bank Ltd. (hereinafter "Cayman National") be and is hereby authorised and/or requested to I) Open a Cayman National VISA Business Account in the name of the Company		Signature		II) Warrants that the information given herein is true and complete. III) Agrees to pay and hereby authorises Cayman National to debit to the Company's Card Account the fees payable pursuant to the Credit Card Agreement and Disclosure Statement as agreed between the Company and Cayman National from time to time. We certify the above to be a true copy from the minutes.		
		Position Held				
II) Make any enquiries it deems necessary in connection with the request.	Authorising Limit					
	Name					
III) Issue at its discretion a Card on the Companies Card Account to any person(s) nominated in a request signed in the person(s) holding the postion(s) of		Signature		Date		
Signature of Board Meeting Chairman Signature of		Signature of Board Meeting Secretary	of Board Meeting Secretary			
FOR BANK USE ONLY						
Notes						