



CUSTOMER ACCOUNT RECORD AND
NON-PERSONALIZED CARD APPLICATION FORM

NEW

REPLACEMENT

PREPAID CARD NUMBER:

Grid for card number input

PERSONAL INFORMATION

LAST NAME: FIRST NAME MIDDLE NAME

ADDRESS: ZIP CODE:

LANDLINE: MOBILE: PERSONAL EMAIL ADDRESS:

DATE OF BIRTH: CITY OF BIRTH: MOTHER'S MAIDEN NAME:

OCCUPATION CIVIL STATUS: GENDER: NATIONALITY:

EMPLOYER'S/ BUSINESS NAME ADDRESS:

EMPLOYER'S/ BUSINESS ADDRESS

HOME PHONE NUMBER: TIN: SSS/GSIS NUMBER

CARD AND PIN MAILER RECEIVED BY: Printed Name and Signature

ACKNOWLEDGMENT

I certify that the foregoing information is true and correct. I hereby waive confidentiality of all information obtained by EasWest in connection with this Customer Account Record and Non-Personalized Card Application form, and for any business purpose. I likewise accept, consent to and agree with the terms and conditions applicable to EastWest prepaid cards, which have been made available to me via eastwestbanker.com, as well as future amendments thereto.

CLIENT SIGNATURE OVER PRINTED NAME

FOR BANK'S USE ONLY

I.D.s PRESENTED:

1. _____

2. _____

RIM NUMBER: _____

PROCESSED BY: _____

PREPAID CARD PURPOSE:

PAYROLL PERSONAL USE

REMITTANCE GIFT

OTHERS: (PLS. SPECIFY) _____

APPROVED BY: _____