Belize Bank INTERNATIONAL
The Matalon Business Center, 2nd Floor
Belize City, Belize, Central America

Visa Debit Card Application

Tel: (501) 227-0697 / 1548
Facsimile: (501) 223-0986
Email:services@belizebankinternational.com

KINDLY COMPLETE ALL SECTIONS

ACCOUNT INFORMATION

Name of Bank Account	Email
Bank Account Number	Mailing Address for the card (s)

NOTE: If more than 2, please attach the same applicant details as requested below for any additional applicant.

1 - Primary Applicant (Authorized Signatory)

Title	First Name	Last Name
Nationality		Date of Birth (dd/mm/yy)
Passport No.	Country of Issue	Email
Home No.		Mobile No.
Work No.		Fax No.

Please indicate how this name is to appear on the card (max 24 characters) * Example: John Doe or J. Doe

2 - Secondary Applicant (Authorized Signatory

Title	First Name	Last Name
Nationality		Date of Birth (dd/mm/yy)
Passport No.	Country of Issue	Email
Home No.		Mobile No.
Work No.		Fax No.

Please indicate how this name is to appear on the card (max 24 characters) *

3 - Delivery Method - Please note for secuirty reason the Card and PIN has to be sent in two separate mailings

Registered Mail the Card) [ ]	Courier the Card [ ]
(Free of cost - takes 4 to 6 weeks depending on destination)	(Cost of US$75 per package - takes 3 to 5 business days depending on the destination)
Registered Mail My PIN [ ]	Courier the PIN [ ]
(Free of cost - takes 4 to 6 weeks depending on destination)	(Cost of US$75 per package - takes 3 to 5 business days depending on the destination)

I (We) agree that the use of any Debit Card ("Card") issued in response to this application will constitute my (our) Agreement to be jointly and severally bound by the Terms and Conditions of the Visa Debit Cardholder Agreement delivered with the Card. It is certified that the above information is complete and true, and is given to induce the Bank to issue said Card (s). I (We) authorize you to make whatever credit and/or investigative inquiries deemed necessary in connection with this application and to exchange with others regarding my (our) Card transactions. I (We) understand a PIN will be assigned to me(us). I (We) understand that this is not a Credit Card, and that no commitment to extend credit to me (us) will be made by our issuance of the Debit Card (s) requested. I (We) acknowledged and agree to the Terms and Conditions as outlined above.

Signed: _____ _____

Authorized Signatory Date Authorized Signatory Date

***THIS CARD CANNOT BE USED FOR INTERNET PURCHASES**

For Bank Use Only

Approved By: *Date opened:*