



🛮 Yes, I would like to take advantage of the benefits of the Cornèrcard Reload and choose the following design:



Cornèrcard Reload Silver

□ **VISA** 05/386/29/A49



Cornèrcard Reload Silver

mastercard 05/382/29/A58



Cornèrcard Reload Orange

□ **VISA** 05/386/29/A54



Cornèrcard Reload Orange

mastercard 05/382/29/A62



Cornèrcard Reload Blue

□ **VISA** 05/386/29/A51



Cornèrcard Reload Blue

mastercard 05/382/29/A60

MCBGLI21SR01-00015 AGR: CCMI000029

Personal information on the principal card applicant		
My name should appear on the card as follows (first/last name):		
Please note that all correspondence will be addressed to the cardholder c/c The American School in Switzerland, Mrs. Grazia Pongelli, Via Collina		
☐ Mr. ☐ Ms. ☐ Mrs.	Correspondence in ☐ English ☐ German ☐ French ☐ Italian	
Last name	First name	
Street/No. c/o The American School in Switzerland, Via Collina d'Oro	Postal code/Place 6926 Montagnola	
Country of residence Switzerland	Nationality Date of birth	
Place of birth (Place/Country)	E-mail	
	Mandatory information	
Home phone +41 91 960 51 51	Mobile	
Tax Residence: The only tax residence coincides with the country of residence If no, please indicate all countries of tax residence:	ce mentioned above yes no (in case of multiple tax residences select «no»)	
2. Personal Information of the Legal Guardian (mandatory in the case	of minors)	
☐ Mr. ☐ Ms. ☐ Mrs.		
Lastana	Education	
<u>Last name</u>	First name	
Street/No.	Postal code/city	
Country of residence	Nationality	
Date of birth	Place of birth (city/country)	
E-mail	Marital status	
Home phone	Mobile	
Profession/position	Company	
Gross annual income ☐ USD 0-250,000 ☐ USD 250,001 - 500,000 ☐	+ USD 500,000	
	Important: please enclose a copy of your legal guardian's identification document.	
3. Form A – Declaration of identity of the beneficial owner (mandatory	information)	
Important: information required In accordance with Article 27 of the Agreement on the Swiss banks' code of conduct declare that the money due for card usage and paid to the card issuer for that purpos belongs to the principal card applicant belongs to the following person(s):		
Last name	First name	
Street/No.	Postal code/city	
Country of residence	Place of birth (city/country)	
Nationality	Date of birth	
As the principal card applicant/principal cardholder, I hereby undertake to automatical false information on this form (Article 251 of the Swiss Criminal Code, document force		

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4. Source of the funds
Funds used to pay the monthly statement (or any additional amount) or to reload the prepaid card.
□ Savings □ Income □ Family assets □ Inheritance/donation □ Sale of assets
☐ Other (please specify)
5. For U.S. persons only (circumstantial evidence: green-card holder, citizen/resident/place of birth/other address in the USA)
☐ I, as the cardholder/applicant, confirm that I am to be qualified as a U.S. person within the purview of the legal provisions of the IRS (Internal Revenue Service, U.S. Department of the Treasury).

The Beneficial Owner will duly complete and sign the W-9 form available on www.irs.gov/pub/irs-pdf/fw9.pdf. The cardholder/applicant will duly complete and sign the Waiver for Cardholder concerning-

The cardholder will duly complete and sign the W-9 form available on http://www.irs.gov/pub/irs-pdf/fw9.pdf together with a Waiver for cardholder to be signed also by the legal quardian. □ I, as the cardholder/applicant, confirm that the Beneficial Owner is to be qualified as a U.S. person within the purview of the legal provisions of the IRS

Beneficial Owner, to be signed also by the legal guardian.

(Internal Revenue Service, U.S. Department of the Treasury).

We hereby confirm that the information provided in this application for a credit card (main card and, to the extent applicable, additional card) or a prepaid and rechargeable card is correct and authorize (Corner Bank Ltd. (hereinafter referred to as the "Bank") to obtain from third parties, in particular from the Central Office for Oredit Information (ZEKI) and public bodies (for example debt enforcement authorites, tax offices, and residents' registration offices), credit reference agencies, employers, and other suitable sources of information provided by law (for example informations). (Consumer Credit Information Offices) and information that may be required for checking the particulars provided by us above or for the purpose of processing our application, issuing card(s), or for contract management. We also authorize the Bank to notify the ZEK in cases where our card is blocked or used fraudulently or we are in significant arrears of payment or any similar circumstances. We hereby authorize the Bank to decline this application it is discretion without giving any reason. On acceptance of this card application, we will receive the cards requested, a copy of this application and the credit option agreement, the General Terms and Conditions (GTC) for our Visa and Mastercard credit and prepaid cards, as well as our unique PIN. The GTC can be accessed or ordered at any time at corneraor. Chrieffez (Visa/Mastercard) and dinersculb.chriefyte (Diners Club) or by calling +41 18 00.41 41. All legal relations with the Bank will be governed by and construed in accordance with Swiss law. Lugano will be the place of performance, the place of debt enforcement for Cardholders resident abroad, and the exclusive place of jurisdiction for all disputes, subject to mandatory provisions of Swiss law. By using and/or signing the card, we confirm that we have received and understood the GTC of the Bank and, to the extent relevant, the General Terms of Insurance (GTI) and that we accept all the applicable terms. Charges, interest t

## 7. Insurance products; cooperation with insurance companies

Insurance mediation and data protection: We acknowledge and accept that, depending on the card product selected, insurance benefits may also be included. The General Terms of Insurance (GTI) for insurance cover provided automatically and free of charge with Cornercard products can be accessed or ordered at any time at cornercard.ch/e/gtc (Visa/Mastercard) and dinersclub.ch/e/documents (Diners Club). We acknowledge that the respective insurer alone is liable for any errors, negligence, or incorrect information in connection with the insurance contracts it provides. Personal data made available in connection with any insurance may be disclosed to the insurers and will be processed by the Bank and the insurers exclusively for the purpose of concluding and administering the insurance contract and in the event of a claim. Personal data may be disclosed to authorized third parties and/or other Group companies and/or the insurer for the purpose of processing the insurance contract. Data may be transferred abroad if such third country provides for equivalent data protection (recognized as such by Swiss data protection legislation). Edition 01.2022

abroad if such third country provides for equivalent data protection (recognized as such by Swiss data protection legislation). Edition 01.2022

Declaration for the requested additional services: In our capacity as signatories of the application for a credit card (principal and/or additional card) or a prepaid or reloadable card, we acknowledge that on acceptance of this application for the requested additional services from Cornér Bank Ltd., or from Securicard SA for the Securicard products, we will receive a written confirmation. Right of withdrawal: 14 days after the start of the insurance in accordance with Insurance Contract Act Art. 2a. The withdrawal may be made in writing or in another form that allows proof by text. The respective terms and conditions (General Terms of Insurance and other Terms of use, as applicable) for the use of the above-mentioned services as well as the information on the respective insurer can be viewed at cornercard.ch/e/gt can be requested by calling +41.91. 80.041.41. The terms and conditions for Securicard products can be viewed at securicard.ch or can be requested by calling +41.58.122.10.10. Any applicable insurance premiums or service fees will be charged to our card automatically. The insurance begins on the date stated in the insurance confirmation. The insurance ended if it is cancelled, the premiums due are not paid, the card is definitively blocked or the contractual relationship with the insurance coverage and services are provided exclusively in accordance with the General Terms of Insurance proment protection insurance, travel insurance, travel accident Advantage, extended warranty for electrical and electronic appliances, private and motor legal protection insurance and for Securicard insurance benefits. Edition 01.2022

Applying for **Payment Protection Insurance**, I confirm that I am between 18 and 62 years old. I further confirm to be resident in Switzerland or in the Principality of Liechtenstein (the enclave of Büsingen am Hochrhein (DE) is excluded), to have been employed for more than 6 months and at least 16 hours a week (**self-employed persons are excluded from the unemployment coverage**), to be in a permanent and non-terminated employment relationship, not to be close to early retirement, not to have been absent in part or in full from work due to illness or accident for more than 25 workdays during the last 12 months, not to have been treated on an in-patient basis for more than 20 successive days and currently not to be scheduled for admission to a hospital. *Edition 01.2022* 

With the signature of the application we confirm to have read and understood the terms and conditions applicable to the additional services (General Terms of Insurance, other Terms of use, as applicable) and that we accept them without reservation.

We further acknowledge that, the card is only valid as long as the cardholder is a student at TASIS and that 30 days after the student has officially left TASIS the card will be blocked for security reasons. We authorize Cornèr Bank Ltd. to transfer a remaining balance of the card to the bank account of TASIS, which will then establish a final collective statement. Cornèr Bank Ltd. assumes no responsibility neither with regard to the correctness of such final statement provided by TASIS nor to the effective transfer of a remaining balance to the former cardholder and/or its legal representative. Any claims concerning such final statement or the remaining balance have to be asserted exclusively against TASIS.

Version 03.2020

9. Signature			
By signing I confirm that I have taken not	e of, and understood, the above information.		
Place/Date	Prepaid Card Applicant	<b>X</b>	
Place/Date	Signature of the legal guardian	X	
	(mandatory in the case of minors)		
10. Have you remembered everythin	ng?		
<ul> <li>☐ Have you selected your Cornèrcard Reloa</li> <li>☐ Have you filled out the Identification of the</li> <li>☐ Have you enclosed a copy of your identific</li> <li>☐ If you are a minor, have you enclosed a company of the properties of the p</li></ul>	Beneficial Owner?		