Diners Club INTERNATIONAL®

BMO Financial Group

Corporate Card Program

Cardmember Application
Club Cash® Enrollment
Individual Billing

Mail or fax completed applications to:

BMO Harris Bank N.A.
Client Services
P.O. Box 6138
Carol Stream, IL 60197-6138
Fax: 1-855-803-7341

For Organization's Program Administrator
Use: 16-digit Summary Account #

_____

__Application cannot be processed without this required information.__

DINERS CLUB® CORPORATE CARD ENROLLMENT *(EMPLOYEE INFORMATION)* (PLEASE ALLOW 21 CHARACTERS FOR FIRST, MIDDLE AND LAST NAME ONLY)

TITLE _____ *FIRST NAME _____ MIDDLE _____ *LAST _____ ORGANIZATION NAME _____

*HOME STREET ADDRESS (no P.O. Box) _____

*HOME STREET ADDRESS (no P.O. Box) _____ CITY _____ STATE _____ ZIP _____

BILLING ADDRESS (if different than above) _____

BILLING ADDRESS (if different than above) _____ CITY _____ STATE _____ ZIP _____

*BUSINESS TELEPHONE _____ _____ _____ HOME TELEPHONE _____ _____ _____ *Password for security purposes _____

*DATE OF BIRTH __MM DD YYYY_____ *SOCIAL SECURITY NUMBER _____ E-MAIL ADDRESS _____

If you provide an e-mail address, we may use it to contact you about your account.

TO DESIGNATE ANOTHER PERSON TO MANAGE YOUR ACCOUNT, INDICATE BELOW

Name: _____ Relationship: _____

CLUB CASH® ENROLLMENT *(OPTIONAL)* PARTICIPATION AND APPROVAL BY THE ORGANIZATION IS REQUIRED BEFORE ENROLLMENT.

At the request of your Organization, you may enroll in the Club Cash program. With Club Cash access, cash for business expenses is as close as the nearest Automated Teller Machine (ATM). All you need is your Diners Club Corporate Card and your Personal Identification Number (PIN) to access cash at Cirrus® ATMs worldwide, 24 hours a day, seven days a week.

☐ By checking this box, I ask to be enrolled in the Club Cash cash advance program. I understand that I may only enroll in the Club Cash program with the approval of my Organization.

Diners Club will choose a PIN and mail it to me.

TERMS AND CONDITIONS

I, the individual applicant identified above, request that BMO Harris Bank N.A. ("Diners Club") consider my application for a Diners Club Corporate Card. By signing below or transmitting this form by e-mail, I certify that I have read the application and agree to its terms. I also agree to be bound by the terms of the Diners Club Cardmember Account Agreement ("Agreement") that will be sent with my Diners Club Corporate Card. The Agreement will bind me unless I cancel my Diners Club Corporate Card account ("Account") within 30 days after receiving my Diners Club Corporate Card and I have not used or authorized use of my Account. Diners Club may change the Agreement at any time in accordance with its terms.

I authorize Diners Club to gather information about me from the organization requesting that the Card be issued to me ("Organization"), credit bureaus and others to verify my identity and to determine my eligibility for the Account. If I ask, Diners Club will tell me whether it requested a credit bureau report and the names and addresses of any applicable credit bureau. I authorize Diners Club to disclose information about my application or Account to my Organization, my Organization's parent and affiliates, Diners Club International, other Diners Club franchises, BMO Harris Bank N.A., the BMO Financial Group of companies and their affiliates, MasterCard, and other third parties as deemed appropriate by Diners Club for its business purposes and/or the business purposes of my Organization.

I will use my Diners Club Corporate Card only for my Organization's business purposes. To receive a Diners Club Corporate Card, I must meet Diners Club's qualification criteria. Diners Club reserves the right to impose charge limits on my Account at its discretion or at the request of my Organization. Diners Club will inform me in a separate letter if it has imposed a charge limit at its discretion, but I must consult with my Organization to learn if Diners Club has imposed a charge limit at my Organization's request.

Federal law requires Diners Club to obtain, verify, and record information that identifies each person who opens an account, in order to help the government fight the funding of terrorism and money laundering activities. To process the application, Diners Club must have my name, street address, date of birth and other identifying information, and Diners Club may ask for identifying documents from me as well.

EMPLOYEE SIGNATURE

X _____

DATE

__MM DD YYYY_____

ORGANIZATION INFORMATION AND AUTHORIZATION (TO BE COMPLETED BY THE PROGRAM MANAGER)

NAME OF ORGANIZATION REQUESTING CARD ISSUANCE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Cardmembers will be assigned a daily and weekly cash advance limit in accordance with Diners Club's policy and the Organization's agreement with Diners Club. If different limits are desired for this Applicant, please call Client Services at 1-800-964-9444. Diners Club must approve exception limits.

Indicative Data Fields

FIELD 1 | FIELD 2 | FIELD 3 | FIELD 4 | FIELD 5 | FIELD 6

AUTHORIZED SIGNATURES AND TITLES (REQUIRED IF FORM IS PRINTED)

AUTHORIZED SIGNATURE AND TITLE

X _____

AUTHORIZED SIGNATURE AND TITLE

X _____

FOR DINERS CLUB USE ONLY

_____
MM DD YYYY
DATE

_____
PROCESSED BY

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