

Organisation's Appointment of Authorised Person Form



Organisation name (in full)

Access to: (tick one)

Agency Account

☐

Account Number

(Including all related individual Cardholder's Accounts)

Individual Account

☐

Account Number

Section 1 - Type of Access

(Tick one - Appointment is for Authority to Operate unless you choose otherwise)

Enquiry Access Only

☐

This will permit the Authorised Person to:

- Obtain Account information

Full Account Access

☐

This will permit the Authorised Person to:

- Obtain Account information
- Make amendments to the Account
- Dispute transactions
- Redeem rewards
- Access to virtual card portal

Duration of Authority: This Authority commences immediately and continues until Diners Club is notified otherwise.

Section 2 - Details of New Authorised Person

Title	Surname	First Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Existing Cardholder? Yes ☐ No ☐

Date of Birth	Mother's Maiden Name	Nationality
<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>	<input type="text"/>	<input type="text"/>

Occupation	Country of Birth
<input type="text"/>	<input type="text"/>

Residential Address	Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone	Mobile	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

Privacy Consent: By signing this form, the Authorised Person agrees that we may obtain, use and disclose their personal information for the purpose of this authorisation. We may provide the Authorised Person's personal information to related or selected third parties both of which may be in or outside Australia on a confidential basis for the purpose of providing administration or services in respect of this Account. For information about privacy please visit our website.

Signature of Authorised Person	Date
<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>

Section 3 - Organisation's Authorisation

Where the business is a COMPANY/SOLE TRADER/PARTNERSHIP (two signatures required)

Signature of Director/Partner for on behalf of the business	Date	Signature of Director/Partner/Company Secretary for on behalf of the business	Date
<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>	<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>

Name	Name
<input type="text"/>	<input type="text"/>

Where the business is a TRUST and the TRUSTEE is an INDIVIDUAL

Signature of Trustee for on behalf of the business	Date	Name
<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>	<input type="text"/>

Name	Name
<input type="text"/>	<input type="text"/>

Where the business is a TRUST and the TRUSTEE is a COMPANY (two signatures required)

Signature of Director for on behalf of the business	Date	Signature of Director/Partner/Company Secretary for on behalf of the business	Date
<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>	<input type="text" value="X"/>	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>

Name	Name
<input type="text"/>	<input type="text"/>

Please email your completed form to **citiauspo@citi.com** or mail to:
Customer Service, Diners Club International, GPO Box 40, Sydney NSW 2001

For further information call Diners Club Customer Service 24 hours a day on **1300 360 060**.