Tourvest Financial Services (Pty) Ltd t/a Travelex

Multi-currency Cash Passport Application Form



NEW CAR	RD	Please co	Please complete section			2 CARD RELOAD		Pleas	se complete section 1, 3	CARD CASH OUT		Please complete section 1, 4		
DATE	ATE			BRAI	BRANCH				GTS REF					
TELLER NO	0				TELLI	ER NAME								
1. CLIEN	NT DETAILS (To be com	pleted fo	r all applicati	ions)									
FIRST NAME								SURNAME						
STREET AI	DDRESS													
									CITY					
COUNTRY	′								POSTAL CODE					
DATE OF BIRTH									ID NUMBER					
PASSPORT NUMBER									COUNTRY OF ISSUE					
PASSPORT ISSUE DATE									PASSPORT EXP DATE					
CHALLENG	GE QUESTIO	What is your favorite holiday Destination?						ANSWER						
MOTHERS	S MAIDEN N													
CONTACT NUMBER									EMAIL ADDRESS					
2. NEW	CARD PURCI	HASE (To be	e comple	ted for a nev	v card	application a	and a	dditior	nal card issue)					
	CARD NUM								ADDITIONAL CARD N	UMBER				
Do you require an additional car			d	YES	NO									
Please complete the amount required for each currency required														
USD						AUD				AED				
EUR						NZD								
GBP				CAE										
3. CARD RELOAD (To be completed for a reloading of an existing card)														
CARD NU														
	mplete the a	mount req	uired for	each currenc	y requi									
USD						AUD				AEC)			
GBP						NZD CAD								
4. CASH OUT (To be completed when either cashing out or closing card)														NO
Please co		mount you	wish to	cash out for e	ach cu	rrency			Do you wish to	close tr	ie card		YES	NO
USD	Imprete the a	infount you	Wish to	cusii out for c	acii cu	AUD				AEC)			
EUR					NZD									
GBP					CAD									
•			n supplie	d above is tru	ue and	correct and I	confi	rm tha	t I agree to the terms and	conditio	ns set out for t	this product	t. I understand	d the meaning
thereof and Signature:	accept as bin	ding.										Di	ate:	
Tick this box if you are under the age of 18 and applying for a card* *Please note for sales to minor under the age of 18, we will require the consent and assistance of the minor's parent or legal guardian, as well as														
				der the age of and parent a				isent a	riu assistance of the minor'	s parent	or legal guardia	ırı, as well a	s	
Parent of G	Guardian ID:_			Parent of Guardian Signa					ignature:			Da	ate:	