

2. Identity Information and Agreement

If you are unable to provide the required information below, see Section 6 for alternative options.

To confirm your identity please complete EITHER 1 or 2:

1: Complete/tick TWO of the following FOUR options:

a. I am on the Electoral Roll at the address provided (Please tick)

b. My Home Landline Telephone Number – registered in my name

c. My Full UK Driving Licence Number (no.5 on front)

d. My Electricity Supply Number – registered in my name (see Section 7)

OR

2: With a copy of your Passport

I am registering by enclosing a black and white photocopy of the photo page of my Passport (older style Passports that are not machine readable require certification – see Notes in Section 6)

IMPORTANT: We will not be able to process your Activation Form unless you have ticked this box to confirm that you accept the following:

I understand that the Financial Services Compensation Scheme is not applicable to the MasterCard® Prepaid Card. No other compensation scheme exists to cover losses claimed in connection with this Prepaid Card. I understand that this means that in the unlikely event that Newcastle Building Society becomes insolvent my funds may become valueless and as a result I may lose my money.

I confirm that I am over 18 years old, the information that I have provided is correct and I have read, understood and agree to the Terms and Conditions of use.

Signature

Date DD/MM/YYYY

3. Payment and Essential Information

Please choose ONE of the following payment options:

Postal Order* SMS Paysafecard
 Visa MasterCard Maestro/Switch Amex

Enter Card Number, Postal Order, SMS Keycode or Voucher Number here:

* If paying by Postal Order, please return it together with this Activation Form.

Name on Card (if paying by Card):

Expiry Date

Valid From (Solo/Switch only)

Issue Number (Solo/Switch only)

Card Security Code (last 3 digits on the reverse)

Please select your tariff plan (tick one box only):

See pack reverse and user guide for more details

Pay As You Go Pay Monthly

Please choose only ONE of the following THREE Card options:

I require (tick one box only):

A Card for myself only **OR** A Card for an Authorised User only **OR**
 One Card for myself and one Card for an Authorised User

You must complete and memorise the following information:

Your Account Password – minimum 5, maximum 10 characters

Your 4 digit Secret Number, for example, your Mother's date of birth:

Please note:
this is **NOT** your Card PIN

How would you like to be contacted?

By Email By Telephone By Text Message

4. Authorised User Information (if applicable)

Tick ONE box only:

Please choose only ONE of the following TWO options:

- a. The Authorised User will have access to all available funds.
 b. I will allocate funds to the Authorised User's Card online from my eaccount.

I have authorised the person below to use the Card that I am registering for.
Please note: This Card will be personalised in your Authorised User's name.

Relationship to me

Title First Name/s

Surname/Family Name

Date of Birth DD/MM/YYYY

Place of Birth

Nationality

Authorised User's Address Details

Country (where applicable)

Postcode

Your Authorised User's 4 digit Secret Number, for example, their Mother's date of birth:

Please note:
this is **NOT** their Card PIN