

FEES AND CHARGES

Annual Membership Fee	Principal Card P1,600	Supplementary Card P800
Interest Charge	3.50% per month, computed based on average daily balance (or 42% effective rate annually)	
Cash Advance Service Fee & Interest Charge	1% of the Cash Advance amount or P500 , whichever is higher; and 3.50% Interest Charge imposed on the cash advance amount, which shall accrue from the date of availment until full settlement or payment.	
Cash Advance Over-the-Counter Fee	A fee of P500 will be charged for cash advance transactions availed over-the-counter at EastWest stores in addition to the Cash Advance service fee and applicable Interest Charge. The proceeds of the over-the-counter Cash Advance transaction shall be net of the Over-the-Counter Fee.	
Late Payment Charge	7.50% of the Minimum Payment Due or P500 , whichever is higher.	
Over Credit Limit Fee	P500 will be charged whenever the outstanding balance exceeds the prescribed credit limit within the billing period.	
Returned Check Fee	P1,000 for every returned check	
Retrieval Fee	P200 for the retrieval of each retail/installment and mail-order/telephone-order charge slip; P1,250 for the retrieval of each travel and entertainment charge slip.	
Card Replacement Fee	P400 for every card replacement	
Foreign Currency Conversion Fee	Transactions made in foreign currencies/merchants or those processed by foreign acquirers shall be automatically converted to Philippine Peso at the MasterCard currency conversion rate on the day the transaction is processed, plus a Foreign Currency Conversion Fee of 2.50% which is comprised of MasterCard's Assessment Fee and EastWest's Service Fee.	
Gambling and Gaming Fee	A 5% service fee shall be charged on gaming/gambling transactions and/or transactions made at gaming/gambling establishments, including the placement of wagers, purchase of lottery tickets or other values in conjunction with any gaming or gambling activities.	
Multiple Payment Fee	Cardholders are allowed a maximum of three (3) payment transactions in EastWest Accredited Payment Channels within a statement cycle. A P50 fee will be charged for each EastWest Credit Card payment made after the 3rd payment transaction. Payments made in EastWest Payment Channels will not incur any charges.	
Installment Pre-Termination Processing Fee	5% of the remaining principal balance or P500 , whichever is higher.	
Closed Card Account Service Fee	For Closed Card Accounts which have credit balances, the cardholder shall make the appropriate arrangement with EastWest to collect the credit balance within three (3) months from the date when the Card Account is closed. Otherwise, EastWest shall deduct from such credit balance a monthly service fee of P200 to cover for administrative costs incurred by EastWest in maintaining the cardholder's account.	

Engage the Animo.



The De La Salle Alumni Association MasterCard APPLICATION FORM

Issued by:



APPLICATION REQUIREMENTS

For applicants WITH an existing credit card, submit a photocopy of one (1) valid photo-bearing ID (e.g. Company ID, Driver's License, Passport, Professional Regulation Commission (PRC) ID, SSS, BIR ID, Voter's ID, etc.).

For applicants WITHOUT an existing credit card, submit a photocopy of one (1) valid photo-bearing ID (e.g. Company ID, Driver's License, Passport, Professional Regulation Commission (PRC) ID, SSS, BIR ID, Voter's ID, etc.) and any ONE of the following:

1. Latest ITR
2. Certificate of Employment
3. One month original pay slip

Are you an existing EastWest Client? Yes Depositor No
 Borrower

Are you an existing Principal EastWest Credit Cardholder? Yes No

EastWest Credit Card Number

MY PERSONAL INFORMATION

FULL NAME

First Middle Last

NAME TO APPEAR ON CARD (Must not exceed 19 characters including spaces) Last

BIRTHDATE (MM/DD/YYYY) PLACE OF BIRTH MOTHER'S FULL MAIDEN NAME

GENDER CITIZENSHIP

Male Female

Filipino Others

ACR No.

HOME ADDRESS

No. Street Village/Brgy/Municipality

City/Province PERMANENT ADDRESS Check if the same as Home Address. Zip Code

No. Street Village/Brgy/Municipality

City/Province HOME PHONE NUMBER MOBILE PHONE NUMBER

(if provincial, include area code)

TAX IDENTIFICATION NUMBER SSS/GSIS NUMBER

MY CREDIT CARD REFERENCES (Existing Principal Credit Cards)

Card Issuer Credit Card Number

MY WORK INFORMATION

SOURCE OF FUNDS

Salary/Benefits
 Allowances

Business Income
 Remittance

Retirement/Separation
 Others

COMPANY/BUSINESS NAME

POSITION/TITLE

DEPARTMENT

COMPANY/BUSINESS ADDRESS

No. Street Village/Brgy/Municipality

City/Province Zip Code

COMPANY/BUSINESS PHONE NUMBER (If provincial, include area code and local extension)

E-MAIL ADDRESS

GROSS ANNUAL INCOME (Should match income document submitted)

NO. OF YEARS WITH PRESENT EMPLOYER/BUSINESS

MY BILLING ADDRESS

Your card may be delivered to the alternative address if we are not able to deliver to your preferred address.

Send my card to my: Home Address Company/Business Address

MY STATEMENT OF ACCOUNT

Go green, Go paperless statement!

In support to saving mother earth, your credit card Statement of Account (SOA) will be sent to your e-mail address on record through our electronic Statement of Account (e-SOA) Facility. It's convenient, secure and earth-friendly.

Your e-SOA will be sent to your e-mail address in a password protected PDF file. With an e-SOA, you can view your SOA anytime and keep the file without the paper clutter. An SMS advisory will be sent to your mobile number on record to let you know that your e-SOA has been sent.

Should you prefer to receive your SOA in your billing address, please tick this box:

Send my SOA to my billing address

I certify that the foregoing information is true and correct, and consent to the verification, disclosure and use of the same by East West Banking Corporation, its affiliates and subsidiaries, and third-party service providers in connection with this application and/or any other business purpose. This may include random verification with the BIR in order to ascertain authenticity of the ITR and accompanying financial statements I am to submit in relation to this application. I hereby waive confidentiality of all information obtained by EastWest in connection with this application under applicable laws and regulations. I understand that this application is subject to EastWest's applicable credit policies and procedures. In case my application is disapproved, I acknowledge that EastWest is not obliged to advise me of the disapproval. My submission of this Application Form shall also constitute as my written request for the availment of other product/s of EastWest such as, but not limited to, other credit cards, loans, credit facilities, etc. Should I be qualified for such other EastWest product/s based on the information provided herein, I am willing to submit all other necessary requirements for the product/s applied for, if necessary. By submitting this Application Form, I am also consenting to the sending of offers of other EastWest product/s at my address/es indicated herein at any time. I further request that product offers be sent to me by mail, email, text, call or thru any other means. I understand that my use/availment of such other EastWest product/s will be solely at my option.

Signature of Principal Applicant

Date

FOR BANK USE ONLY

BL/WL

NFIS

DUP

PHX

EVAL

AML RATING

HR

NR

SOURCE CODE:
C-REG-SAF-OMC-DLSAA

CONFIDENTIAL

EWB-2015.03.17.04