

RBC Royal Bank of Canada The Centre Mews, Leeward Highway P. O. Box 574 Providenciales, Turks & Caicos Islands, BWI

Tel: (649) 941-4776 Fax: (649) 941-8825

## APPLICATION FORM FOR MASTERCARD/VISA/DISCOVER MERCHANT SETUP 1. Company Name: 2. Doing Business As: 3. Previous Bankers: \_\_\_\_\_ 4. Owners: \_\_\_\_\_ 5. Account Number: 6. Type of Business: 7. Business Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ 8. Business Address (P.O. Box): 9. Imprinter Required: 10. Branch Approval: \_\_\_\_\_ 11. Authorization Requirements: P.O.S. \_\_\_\_\_\_ Visa Centre \_\_\_\_ ELECTRONIC DATA CAPTURE Discount Rate Negotiated \_\_\_\_\_ American Express Merchant # Other Merchant #

## PLEASE RETURN THE COMPLETED FORM TO:

CREDIT CARD CENTRE ROYAL BANK OF CANADA EAST HILL STREET NASSAU, BAHAMAS

NOTE: THIS IS TO BE DONE AFTER THE APPLICATION HAS BEEN REVIEWED BY CREDIT MANAGERS.



## MERCHANT & POINT OF SALE SERVICES APPLICATION

## TO: Royal Bank of Canada

Please approve our application to be a Royal Bank point of sale merchant.

We (Applicant) certify that all information supplied to you (Royal Bank of Canada) in our application is true and complete. If you approve our application, you will send us the applicable Merchant Agreement(s) and Service Agreement(s) for the related point of sale services we have applied for. If we use any of your point of sale services after you approved our application, it will mean that we have received and read the Merchant Agreement(s) and Service Agreement(s). It will also mean that we have understood and agreed with you to everything written there.

You may collect credit and other financially related information about us ("information") from us, from credit bureaux and from other parties. You may use information as follows: (i) you may give it to credit bureaux and other parties who have or may have financial or other business dealings with us, (ii) you may use it to determine our financial situation, (iii) you may use it for any purpose related to the provision to us of services we request from you. You may also give it to anyone who works with or for you, but only as needed for the provision of those services, (iv) you may use it to promote your services to us. You may also add it to client lists you prepare and use for this purpose, and (v) you may share it with your affiliates (where the law allows for this), in the form of client lists or otherwise, so that they may promote their services to us.

Even if we are no longer your client(s), you may keep information in your records and use it for the purposes noted above.

Date:	
For Companies	For Partnerships
(Applicant Legal Name)	(Applicant Legal Name)
per:	per:
Name:	Name:
Title:	Title:
per:	per:
Name:	Name:
Title:	Title:
For Associations	For Individual/Sole Ownerships
(Applicant Legal Name)	(Applicant Signature)
per:	
Name:	(If applicable)
Title:	
Branch Approval	_